## Case 16-26723 Doc 1 Filed 08/19/16 Entered 08/19/16 15:20:10 Desc Main Document Page 1 of 54

| Fill in this information to identify your case: |                               |                                   |
|---|-------------------------------|-----------------------------------|
| United States Bankruptcy Court for the:         |                               |                                   |
| NORTHERN DISTRICT OF ILLINOIS                   |                               |                                   |
| Case number (if known)                          | Chapter you are filing under: |                                   |
|   | Chapter 7                     |                                   |
|   | ☐ Chapter 11                  |                                   |
|   | ☐ Chapter 12                  |                                   |
|   | ☐ Chapter 13                  | ☐ Check if this an amended filing |

### Official Form 101

### **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pai | t 1: Identify Yourself   |  |   |
|-----|--|--|---|
|     |  | About Debtor 1:  | About Debtor 2 (Spouse Only in a Joint Case):                     |
| 1.  | Your full name   |  |   |
|     | Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee. | Stella First name  C Middle name  Gomez Last name and Suffix (Sr., Jr., II, III) | First name  Middle name  Last name and Suffix (Sr., Jr., II, III) |
| 2.  | All other names you have used in the last 8 years Include your married or maiden names.  |  |   |
| 3.  | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)  | xxx-xx-4478  |   |

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Debtor 1 Stella C Gomez

|    |  | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):   |
|----|--|---|---|
| 1. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | ■ I have not used any business name or EINs.  Business name(s)  EINs  | ☐ I have not used any business name or EINs.  Business name(s)  EINs  |
| 5. | Where you live   | 1054 Bothwell Cr Bolingbrook, IL 60440  Number, Street, City, State & ZIP Code  Will  County  If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.  Number, P.O. Box, Street, City, State & ZIP Code | If Debtor 2 lives at a different address:  Number, Street, City, State & ZIP Code  County  If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.  Number, P.O. Box, Street, City, State & ZIP Code |
| 6. | Why you are choosing this district to file for bankruptcy  | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)   | Check one:  ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)   |

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Document Case number (if known) Debtor 1 Stella C Gomez

| Part | 2: Tell the Court About   | our B        | ankruptcy Ca    | se                                 |   |  |                          |  |
|------|---|--------------|-----------------|------------------------------------|---|--|--------------------------|--|
| 7.   | The chapter of the Bankruptcy Code you are  |              |                 |                                    | of each, see <i>Notice Require</i> f page 1 and check the appro | ed by 11 U.S.C. § 342(b) for Individuals Fopriate box.   | Filing for Bankruptcy    |  |
|      | choosing to file under  | ■ C          | hapter 7        |                                    |   |  |                          |  |
|      |   | ☐ Chapter 11 |                 |                                    |   |  |                          |  |
|      |   | □ с          | hapter 12       |                                    |   |  |                          |  |
|      |   | □ с          | hapter 13       |                                    |   |  |                          |  |
|      |   |              |                 |                                    |   |  |                          |  |
| 8.   | How you will pay the fee  |              | about how yo    | u may pay. Typ<br>attorney is subr | oically, if you are paying the f                                | check with the clerk's office in your loca<br>ee yourself, you may pay with cash, cas<br>r behalf, your attorney may pay with a cr | hier's check, or money   |  |
|      |   |              |                 |                                    | tallments. If you choose this is (Official Form 103A).          | option, sign and attach the Application  | for Individuals to Pay   |  |
|      |   |              |                 |                                    |   | option only if you are filing for Chapter 7  |                          |  |
|      |   |              | applies to you  | ır family size ar                  | nd you are unable to pay the                                    | r if your income is less than 150% of the fee in installments). If you choose this o   | ption, you must fill out |  |
|      |   |              | the Application | n to Have the (                    | Chapter 7 Filing Fee Waived                                     | (Official Form 103B) and file it with your   | petition.                |  |
|      |   |              |                 |                                    |   |  |                          |  |
| 9.   | Have you filed for<br>bankruptcy within the   | ■ No         | D.              |                                    |   |  |                          |  |
|      | last 8 years?   | ☐ Ye         | es.             |                                    |   |  |                          |  |
|      |   |              | District        |                                    | When  | Case number  |                          |  |
|      |   |              | District        |                                    | When  | Case number  |                          |  |
|      |   |              | District        |                                    | When  | Case number  |                          |  |
| 10.  | Are any bankruptcy  | ■ No         | <u> </u>        |                                    |   |  |                          |  |
|      | cases pending or being filed by a spouse who is                                       | □Ye          |                 |                                    |   |  |                          |  |
|      | not filing this case with<br>you, or by a business<br>partner, or by an<br>affiliate? |              |                 |                                    |   |  |                          |  |
|      |   |              | Debtor          |                                    |   | Relationship to you  |                          |  |
|      |   |              | District        |                                    | When  | Case number, if know   | n                        |  |
|      |   |              | Debtor          |                                    |   | Relationship to you  |                          |  |
|      |   |              | District        | -                                  | When  | Case number, if know   | n                        |  |
| 11.  | Do you rent your residence?   | ■ No         | Go to l         | ne 12.                             |   |  |                          |  |
|      |   | ☐ Ye         | es. Has yo      | ur landlord obta                   | ained an eviction judgment a                                    | gainst you and do you want to stay in yo   | ur residence?            |  |
|      |   |              |                 | No. Go to line                     | 12.   |  |                          |  |
|      |   |              |                 | Yes. Fill out In bankruptcy pet    |   | ction Judgment Against You (Form 101A  | ) and file it with this  |  |
|      |   |              |                 |                                    |   |  |                          |  |

Document Page 4 of 54 Case number (if known) Debtor 1 Stella C Gomez Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to

public health or safety? Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

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Debtor 1 Stella C Gomez

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of:                               |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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| Deb  | tor 1 | Stella C Gomez                          |   | Document   | 1 age 0 01 34                                 | Case number (if k                       | nown)  |
|--|-------|---|---|--|---|---|--|
| Pari   | t 6:  | Answer These Questi                     | ions for Re   | eporting Purposes  |   |   |  |
| 16.  |       | kind of debts do nave?                  | 16a.  | Are your debts primarily constinuividual primarily for a persona         | umer debts? Consume                           | r debts are defined i                   | in 11 U.S.C. § 101(8) as "incurred by an                                       |
|  |       |   |   | ☐ No. Go to line 16b.  |   |   |  |
|  |       |   |   | Yes. Go to line 17.  |   |   |  |
|  |       |   |   | Are your debts primarily busin money for a business or investm           |   |   |  |
|  |       |   |   | ☐ No. Go to line 16c.  |   |   |  |
|  |       |   |   | ☐ Yes. Go to line 17.  |   |   |  |
|  |       |   | 16c.  | State the type of debts you owe  | that are not consumer d                       | ebts or business de                     | bts  |
| 17.  |       | ou filing under<br>eter 7?              | □ No.   | I am not filing under Chapter 7. C                                       | Go to line 18.                                |   |  |
| Do you estimate that<br>after any exempt<br>property is excluded and |       |   | I am filing under Chapter 7. Do y are paid that funds will be availal |  |   | is excluded and administrative expenses |  |
|  |       | nistrative expenses aid that funds will |   | ■ No   |   |   |  |
| be available for distribution to unsecured creditors?                |       | Yes                                     |   |  |   |   |  |
| 18.  |       | many Creditors do                       | <b>1</b> -49  |  | □ 1,000-5,000                                 |   | <b>2</b> 5,001-50,000  |
|  | you e | ou estimate that you owe?               | □ 50-99   |  | ☐ 5001-10,000                                 |   | 50,001-100,000   |
|  |       |   | ☐ 100-19<br>☐ 200-99  |  | □ 10,001-25,000                               |   | ☐ More than100,000   |
| 19.  |       | much do you                             | □ \$0 - \$5   | 50,000   | □ \$1,000,001 - \$10                          | million                                 | ☐ \$500,000,001 - \$1 billion  |
|  |       | nate your assets to<br>orth?            |   | 01 - \$100,000   | <u> </u>                                      |   | □ \$1,000,000,001 - \$10 billion   |
|  |       |   | ■ \$100,001 - \$500,000 □ \$500,001 - \$1 million                     |  | □ \$50,000,001 - \$10<br>□ \$100,000,001 - \$ |   | ☐ \$10,000,000,001 - \$50 billion<br>☐ More than \$50 billion                  |
|  |       |   | <b>—</b> \$500,0  |  |   |   |  |
| 20.  |       | much do you                             | □ \$0 - \$5   |  | □ \$1,000,001 - \$10                          |   | □ \$500,000,001 - \$1 billion  |
|  | to be | nate your liabilities<br>?              |   | 01 - \$100,000   | □ \$10,000,001 - \$50                         |   | \$1,000,000,001 - \$10 billion   |
|  |       |   |   | 001 - \$500,000  | □ \$50,000,001 - \$10<br>□ \$100,000,001 - \$ |   | ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion                     |
|  |       |   | □ \$500,0   | 001 - \$1 million  | <b>—</b> ф100,000,001 - ф.                    |   | Li More than \$50 billion  |
| Part   | t 7:  | Sign Below                              |   |  |   |   |  |
| For  | you   |   | I have exa  | amined this petition, and I declare                                      | under penalty of perjur                       | y that the informatio                   | on provided is true and correct.   |
|  |       |   |   | hosen to file under Chapter 7, I a<br>ates Code. I understand the relief |   |   | er Chapter 7, 11,12, or 13 of title 11, e to proceed under Chapter 7.          |
|  |       |   |   | ney represents me and I did not p<br>i, I have obtained and read the no  |   |   | attorney to help me fill out this  |
|  |       |   | I request i   | relief in accordance with the chap                                       | oter of title 11, United Sta                  | ates Code, specified                    | d in this petition.  |
|  |       |   | bankrupto<br>and 3571.  | y case can result in fines up to \$2                                     |   |   | operty by fraud in connection with a s, or both. 18 U.S.C. §§ 152, 1341, 1519, |
|  |       |   | Stella C  | a C Gomez<br>Gomez   | Sigr  | nature of Debtor 2                      |  |
|  |       |   |   | of Debtor 1  |   |   |  |
|  |       |   | Executed  |  | Exe   | cuted on                                |  |
|  |       |   |   | MM / DD / YYYY   |   | MM / DE                                 | O / YYYY   |

Debtor 1 Stella C Gomez Document Page 7 of 54 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Gary L. Shilts                     | Date          | August 19, 2016       |  |
|--|---------------|-----------------------|--|
| Signature of Attorney for Debtor       |               | MM / DD / YYYY        |  |
| Gary L. Shilts Printed name            |               |                       |  |
| Gary L. Shilts Firm name               |               |                       |  |
| Box 2432                               |               |                       |  |
| Aurora, IL 60507-2432                  |               |                       |  |
| Number, Street, City, State & ZIP Code |               |                       |  |
| Contact phone <b>630-859-8522</b>      | Email address | gshilts@earthlink.net |  |
| 2587769                                |               |                       |  |
| Bar number & State                     |               |                       |  |

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| Fill in this information to id  | entify your case:   |   |   |  |
|---|---|---|---|--|
| United States Bankruptcy Co   | urt for the:  |   |   |  |
| NORTHERN DISTRICT OF  |   |   |   |  |
| Case number (if known)  |   | Chapter you are filin   | g under:  |  |
|   |   | Chapter 7   |   |  |
|   |   | ☐ Chapter 11  |   |  |
|   |   | ☐ Chapter 12  |   |  |
|   |   | ☐ Chapter 13  |   | ☐ Check if this an amended filing  |
| The bankruptcy forms use case—and in joint cases, t would be yes if either debt between them. In joint case all of the forms. | ition for Individuals Fi you and Debtor 1 to refer to a debtor filing a nese forms use you to ask for information from owns a car. When information is needed a se, one of the spouses must report information te as possible. If two married people are filing the a separate sheet to this form. On the top | lone. A married cou<br>om both debtors. Fo<br>about the spouses s<br>ion as <i>Debtor 1</i> and<br>ng together, both ar<br>of any additional pa | ple may file a bankru<br>or example, if a form a<br>eparately, the form u<br>the other as <i>Debtor</i> a<br>e equally responsible<br>ages, write your name | ises <i>Debtor 1</i> and <i>Debtor 2</i> to distinguish 2. The same person must be <i>Debtor 1</i> in e for supplying correct information. If e and case number (if known). Answer |
| For you   | I have examined this petition, and I declar   |   |   |  |
|   | If I have chosen to file under Chapter 7, United States Code. I understand the rel  | I am aware that I may<br>lief available under ea  | / proceed, if eligible, u<br>ach chapter, and I choo  | nder Chapter 7, 11,12, or 13 of title 11, ose to proceed under Chapter 7.  |
|   | If no attorney represents me and I did no document, I have obtained and read the  | ot pay or agree to pay<br>notice required by 11   | someone who is not a U.S.C. § 342(b).   | ın attorney to help me fill out this   |
|   | I request relief in accordance with the ch  | napter of title 11, Unite   | ed States Code, specif  | ied in this petition.  |
|   | I understand making a false statement, or bankruptcy case can result in fines up to and 3571.   | concealing property, o<br>\$250,000, or impriso   | onment for up to 20 yea   | ars, or both. 18 U.S.C. §§ 152, 1341, 1519,  |
|   | Stella Comez Signature of Debtor 1  | 7-3   | Signature of Debtor 2   | ) -  |

Executed on June 18, 2016 MM / DD / YYYY

Executed on

MM / DD / YYYY

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| Debtor 1     | Stella C Gomez                     |   | Cas                            | se number (if known)  |
|--------------|------------------------------------|---|--------------------------------|---|
|              |                                    |   | <u> </u>                       |   |
|              | attorney, if you are<br>ted by one | under Chapter 7, 11, 12, or 13 of title 11, Uni | ted States Code, and have e    | informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b) |
|              | not represented by                 |   | s, certify that I have no know | vledge after an inquiry that the information in the   |
|              | ey, you do not need                | schedules fled with the petition is incorrect.  |                                |   |
| to file this | s page.                            | Signature of Attorney for Debtor                | Date                           | June 18, 2016<br>MM / DD / YYYY   |
|              |                                    |   |                                |   |
|              |                                    | Gary L. Shilts                                  |                                |   |
|              |                                    | Printed name                                    |                                |   |
|              |                                    | Gary L. Shilts                                  |                                |   |
|              |                                    | Firm name                                       |                                |   |
|              |                                    | Box 2432  |                                |   |
|              |                                    | Aurora, IL 60507-2432                           |                                |   |
|              |                                    | Number, Street, City, State & ZIP Code          |                                |   |
|              |                                    | Contact phone <b>630-859-8522</b>               | Email address                  | gshilts@earthlink.net   |
|              |                                    | 2587769   |                                |   |
|              |                                    | Bar number & State                              |                                |   |

|                    |                          | Docume            | <u>nt Page 10 of 54</u> |                                      |
|--------------------|--------------------------|-------------------|-------------------------|--------------------------------------|
| ill in this infor  | mation to identify your  | case:             |                         |                                      |
| Debtor 1           | Stella C Gomez           |                   |                         |                                      |
|                    | First Name               | Middle Name       | Last Name               |                                      |
| Debtor 2           |                          |                   |                         |                                      |
| Spouse if, filing) | First Name               | Middle Name       | Last Name               |                                      |
| Jnited States Ba   | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS             |                                      |
| Case number        |                          |                   |                         |                                      |
| f known)           |                          |                   |                         | ☐ Check if this is an amended filing |

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Pa | t 1: Summarize Your Assets   |             |                           |
|----|--|-------------|---------------------------|
|    |  |             | assets<br>of what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B  | \$          | 174,000.00                |
|    | 1b. Copy line 62, Total personal property, from Schedule A/B   | \$          | 6,270.00                  |
|    | 1c. Copy line 63, Total of all property on Schedule A/B  | \$          | 180,270.00                |
| Pa | t 2: Summarize Your Liabilities  |             |                           |
|    |  |             | iabilities<br>nt you owe  |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$          | 150,637.00                |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                            | \$          | 0.00                      |
|    | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F  | \$          | 12,580.00                 |
|    | Your total liabilities   | \$          | 163,217.00                |
| Pa | t 3: Summarize Your Income and Expenses  |             |                           |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I  | \$          | 3,261.00                  |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J  | \$          | 3,200.00                  |
| Pa | 4: Answer These Questions for Administrative and Statistical Records   |             |                           |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you                     | ır other sc | hedules.                  |
| 7. | ■ Yes What kind of debt do you have?   |             |                           |
|    | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a   | a persona   | l, family, or             |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

the court with your other schedules.

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Page 11 of 54 Case number (if known) Debtor 1 Stella C Gomez

| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form | ١. |
|----|--|----|
|    | 122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.                              | \$ |

1,609.00

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| From Part 4 on Schedule E/F, copy the following:   | Total c | laim |
|--|---------|------|
| 9a. Domestic support obligations (Copy line 6a.)   | \$      | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$      | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$      | 0.00 |
| 9d. Student loans. (Copy line 6f.)   | \$      | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$      | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | +\$     | 0.00 |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$      | 0.00 |

|           | (                         | Case 16-26                              | 723           | Doc 1                  |                 | 08/19/16<br>ument                                | Entered 08/19/16   | 5 15:20:10                                     | Desc         | Main   |
|-----------|---------------------------|---|---------------|------------------------|-----------------|--|--|--|--------------|--|
| -ill      | in this inf               | ormation to ide                         | ntify y       | our case and t         |                 |  |  |  |              |  |
| Deb       | otor 1                    | Stella C<br>First Name                  | Gome          |                        | lle Name        |  | Last Name  |  |              |  |
|           | otor 2<br>use, if filing) | First Name                              |               | Midd                   | lle Name        |  | Last Name  |  |              |  |
| Jnit      | ted States                | Bankruptcy Cou                          | rt for th     | e: NORTHE              | RN DISTF        | RICT OF ILLIN                                    | NOIS   |  |              |  |
| Cas       | se number                 |   |               |                        |                 |  | -  |  |              | Check if this is an amended filing                                       |
| ea<br>ink | cheduch category          | Be as complete                          | Pro           | cribe items. List      | ole. If two i   | married people                                   | n asset fits in more than one one one one one one one one one on | qually responsible                             | e for supply | ring correct   |
|           | ver every q               |   | ce, Buil      | ding, Land, or C       | other Real      | Estate You Ow                                    | n or Have an Interest In   |  |              |  |
|           | No. Go to<br>Yes. Whe     | Part 2. re is the property?             |               |                        |                 |  |  |  |              |  |
| 1.1       |                           |   |               |                        | What            | is the property                                  | ? Check all that apply   |  |              |  |
|           |                           | othwell Cr<br>ess, if available, or oth | er descri     | otion                  |                 | Single-family h<br>Duplex or mult<br>Condominium |  | the amount of any                              | secured cla  | or exemptions. Put ims on <i>Schedule D:</i> ecured by <i>Property</i> . |
|           | Bolingk                   |   | <b>L</b> tate | 60440-0000<br>ZIP Code |                 | Manufactured<br>Land<br>Investment pro           | or mobile home   | Current value of entire property?  \$174,00    | po           | urrent value of the ortion you own? \$174,000.00                         |
|           |                           |   |               |                        | □<br>□<br>Who I | Timeshare Other  nas an interest Debtor 1 only   | in the property? Check one                                       |  | ple, tenancy | ownership interest<br>by the entireties, or                              |
|           | Will                      |   |               |                        |                 | Debtor 2 only                                    |  |  |              |  |
|           | County                    |   |               |                        |                 |  | f the debtors and another ou wish to add about this item         | Check if this (see instruction , such as local |              | nity property  |
|           |                           |   |               |                        | 1/2 i           | nterest Ten                                      | nants in Common with   | sister   |              |  |

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for

pages you have attached for Part 1. Write that number here......>>

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

\$174,000.00

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Case number (if known) Document Debtor 1 Stella C Gomez 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Volks Wagon Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: CC Creditors Who Have Claims Secured by Property. Model: Debtor 1 only 2011 Year: Debtor 2 only Current value of the Current value of the 31,000 Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another \$5,000.00 \$5,000.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$5,000.00 pages you have attached for Part 2. Write that number here...... Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... Misc household goods \$500.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... electronics \$300.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment

Nο

| Do    | htor 1                              | Case 16-26723  | Doc 1             | Filed 08/19/16<br>Document                         | Entered 08/19/16 15:20:10<br>Page 14 of 54<br>Case number (if known) | Desc Main   |
|-------|-------------------------------------|--|-------------------|--|--|---|
| Dei   | btor 1                              | Stella C Gomez   |                   |  | Case number (if known)   |   |
| I     | ☐ Yes.                              | Describe   |                   |  |  |   |
| I     | □ No <sup>′</sup>                   | s  bles: Everyday clothes, fur  Describe                 | s, leather coat   | s, designer wear, shoes                            | accessories  |   |
|       |                                     | noo w  | ooring onno       | rol  |  | \$150.00  |
|       |                                     | nec w  | earing appa       | rei  |  | φ130.00   |
| _     | Jewelry<br>Examp                    |  | stume jewelry,    | engagement rings, wed                              | ding rings, heirloom jewelry, watches, gems, ç                       | gold, silver  |
| I     | ☐ Yes.                              | Describe   |                   |  |  |   |
| I     | Examp<br>■ No                       | rm animals  bles: Dogs, cats, birds, hor  Describe       | rses              |  |  |   |
| _     |                                     | her personal and housel                                  | hold items yo     | u did not already list, i                          | ncluding any health aids you did not list                            |   |
| _     | ■ No<br>□ Yes.                      | Give specific information.                               |                   |  |  |   |
|       |                                     |  |                   |  |  |   |
| 15.   |                                     | he dollar value of all of y<br>art 3. Write that number  |                   |  | ny entries for pages you have attached                               | \$950.00  |
|       |                                     |  |                   |  |  |   |
|       |                                     | scribe Your Financial Asset<br>In or have any legal or e |                   | est in any of the follow                           | ing?   | Current value of the portion you own? Do not deduct secured claims or exemptions. |
|       | <b>Cash</b><br><i>Examp</i><br>☑ No | oles: Money you have in yo                               | our wallet, in y  | our home, in a safe depo                           | osit box, and on hand when you file your petiti                      | ·   |
| I     | Yes                                 |  |                   |  |  |   |
|       |                                     |  |                   |  | Cash on hnd  | \$20.00   |
|       | Examp                               |  |                   | al accounts; certificates counts with the same ins | of deposit; shares in credit unions, brokerage litution, list each.  | houses, and other similar   |
|       | □ No<br>■ Yes                       |  |                   | Institution r                                      | name:  |   |
|       |                                     | 17.1.  |                   | Chase BA   | Ank  | \$100.00  |
|       |                                     | 17.2.  |                   | Midway E   | Bank   | \$200.00  |
|       |                                     | , mutual funds, or public<br>oles: Bond funds, investme  |                   |  | ney market accounts  |   |
| [     | ☐ Yes                               |  | Institution or is | ssuer name:  |  |   |
| _     |                                     | ublicly traded stock and<br>enture                       | interests in ir   | ncorporated and uninc                              | orporated businesses, including an interes                           | et in an LLC, partnership, and  |
| I     | ☐ Yes.                              | Give specific information                                | about them        |  |  |   |
| Offic | cial Forn                           | n 106A/B   |                   | Schedule A/B: F                                    | Property   | page 3  |

Case 16-26723 Doc 1 Filed 08/19/16 Entered 08/19/16 15:20:10 Desc Main Page 15 of 54
Case number (if known) Document Debtor 1 Stella C Gomez Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: pension with Oscar Meyer Unknown **Pension with Dominicks** Unknown 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the

portion you own? Do not deduct secured claims or exemptions.

#### 28. Tax refunds owed to you

No

☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years......

### 29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

☐ Yes. Give specific information.....

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Case number (if known) Debtor 1 Stella C Gomez 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance □ No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: **Term burrial policy** Unknown 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$320.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information.......

54. Add the dollar value of all of your entries from Part 7. Write that number here .....

\$0.00

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Case number (if known)

Document Debtor 1 Stella C Gomez

| Part | 8: List the Totals of Each Part of this Form                 |            |                              |              |
|------|--|------------|------------------------------|--------------|
| 55.  | Part 1: Total real estate, line 2                            |            |                              | \$174,000.00 |
| 56.  | Part 2: Total vehicles, line 5                               | \$5,000.00 |                              |              |
| 57.  | Part 3: Total personal and household items, line 15          | \$950.00   |                              |              |
| 58.  | Part 4: Total financial assets, line 36                      | \$320.00   |                              |              |
| 59.  | Part 5: Total business-related property, line 45             | \$0.00     |                              |              |
| 60.  | Part 6: Total farm- and fishing-related property, line 52    | \$0.00     |                              |              |
| 61.  | Part 7: Total other property not listed, line 54 +           | \$0.00     |                              |              |
| 62.  | Total personal property. Add lines 56 through 61             | \$6,270.00 | Copy personal property total | \$6,270.00   |
| 63.  | Total of all property on Schedule A/B. Add line 55 + line 62 |            |                              | \$180,270.00 |

Official Form 106A/B Schedule A/B: Property page 6

| Fill in this information to identify your case:                       |
|---|
| Debtor 1 Stella C Gomez   |
| First Name Middle Name Last Name                                      |
| Debtor 2  |
| (Spouse if, filing) First Name Middle Name Last Name                  |
| United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS |
| Case number   |
| (if known)  |
|   |

### Official Form 106C

### Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Print description of the assessment and time and Comment only of the Assessment of t

| Brief description of the property and line on<br>Schedule A/B that lists this property | Current value of the<br>portion you own | Amou  | unt of the exemption you claim                                  | Specific laws that allow exemption |
|--|---|-------|---|------------------------------------|
|  | Copy the value from<br>Schedule A/B     | Checi | k only one box for each exemption.                              |                                    |
| 1054 Bothwell Cr Bolingbrook, IL<br>60440 Will County                                  | \$174,000.00                            |       | \$15,000.00   | 735 ILCS 5/12-901                  |
| 1/2 interest Tennants in Common with sister Line from Schedule A/B: 1.1                |   |       | 100% of fair market value, up to any applicable statutory limit |                                    |
| 2011 Volks Wagon cc 31,000 miles Line from Schedule A/B: 3.1                           | \$5,000.00                              |       | \$2,400.00  | 735 ILCS 5/12-1001(c)              |
| Line from Schedule A/B: 3.1  |   |       | 100% of fair market value, up to any applicable statutory limit |                                    |
| 2011 Volks Wagon cc 31,000 miles   | \$5,000.00                              |       | \$2,600.00  | 735 ILCS 5/12-1001(b)              |
| Ellie Holli Genedale 7/2. G.1  |   |       | 100% of fair market value, up to any applicable statutory limit |                                    |
| Misc household goods Line from Schedule A/B: 6.1                                       | \$500.00                                |       | \$500.00  | 735 ILCS 5/12-1001(b)              |
| Line Holli Schedule A/B. G. I  |   |       | 100% of fair market value, up to any applicable statutory limit |                                    |
| electronics Line from Schedule A/B: 7.1  | \$300.00                                |       | \$300.00  | 735 ILCS 5/12-1001(b)              |
| Line nom Scredule A/D. 1.1   |   |       | 100% of fair market value, up to any applicable statutory limit |                                    |
|  |   |       |   |                                    |

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Case number (if known)

|    | otolia o ooilioz  |  |          |   |                                    |
|----|---|--|----------|---|------------------------------------|
|    | Brief description of the property and line on<br>Schedule A/B that lists this property  | Current value of the portion you own  Copy the value from Schedule A/B |          | ount of the exemption you claim eck only one box for each exemption.      | Specific laws that allow exemption |
|    | nec wearing apparel Line from Schedule A/B: 11.1  | \$150.00   | <b>=</b> | \$150.00  100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(a)              |
|    | Cash on hnd<br>Line from Schedule A/B: 16.1   | \$20.00  | <b>■</b> | \$20.00  100% of fair market value, up to any applicable statutory limit  | 735 ILCS 5/12-1001(b)              |
|    | Chase BAnk Line from Schedule A/B: 17.1   | \$100.00   | ■        | \$100.00  100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b)              |
|    | Midway Bank Line from Schedule A/B: 17.2  | \$200.00   |          | \$200.00  100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b)              |
|    | pension with Oscar Meyer<br>Line from Schedule A/B: 21.1  | Unknown  |          | \$0.00  100% of fair market value, up to any applicable statutory limit   | 735 ILCS 5/12-1006                 |
|    | Pension with Dominicks Line from Schedule A/B: 21.2   | Unknown  |          | \$0.00  100% of fair market value, up to any applicable statutory limit   | 735 ILCS 5/12-1001(b)              |
| 3. | Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every  ■ No □ Yes. Did you acquire the property cover □ No □ Yes | 3 years after that for ca  | ases fi  |   |                                    |

|  |  | Document Page 2   |                                    | 20.10 Desc iv                          |                   |
|--|--|---|------------------------------------|--|-------------------|
| Fill in this informati   | on to identify you   |   | V VI :34                           |  |                   |
|  |  |   |                                    |  |                   |
|  | Stella C Gomez First Name  | Middle Name Last Name   |                                    |  |                   |
| Debtor 2   |  |   |                                    |  |                   |
| _  | First Name   | Middle Name Last Name   |                                    |  |                   |
| United States Bankru   | uptcy Court for the  | NORTHERN DISTRICT OF ILLINOIS   |                                    |  |                   |
| Case number  |  |   |                                    |  |                   |
| (if known)   |  |   |                                    | ☐ Check                                | if this is an     |
|  |  |   |                                    | amend                                  | led filing        |
| <b></b>  |  |   |                                    |  |                   |
| Official Form 1  | 06D  |   |                                    |  |                   |
| Schedule D:  | Creditors  | Who Have Claims Secure  | d by Property                      | У                                      | 12/15             |
|  |  | W   |                                    |  |                   |
| s needed, copy the Ad  |  | If two married people are filing together, both are e<br>out, number the entries, and attach it to this form. (   |                                    |  |                   |
| number (if known).   |  |   |                                    |  |                   |
| I. Do any creditors hav  |  | • • •   | /au hava nathina alaa t            | a ranget an this form                  |                   |
|  |  | his form to the court with your other schedules. `<br>  | rou nave notning eise t            | o report on this form.                 |                   |
| Yes. Fill in all   | of the information   | below.  |                                    |  |                   |
| Part 1: List All Se  | ecured Claims  |   | 0.1                                | 0.1                                    | 0.4               |
|  |  | more than one secured claim, list the creditor separate   |                                    | Column B                               | Column C          |
|  |  | a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.  | Amount of claim  Do not deduct the | Value of collateral that supports this | Unsecured portion |
|  | ·  | •   | value of collateral.               | claim                                  | if any            |
| 2.1 Jpmorgan Cl<br>Creditor's Name   | nase Bank  | Describe the property that secures the claim:   | \$150,637.00                       | \$174,000.00                           | \$0.00            |
| Orealtor 3 Name  |  | 1054 Bothwell Cr Bolingbrook, IL  |                                    |  |                   |
|  |  |   |                                    |  |                   |
|  |  | 60440 Will County   |                                    |  |                   |
|  |  |   |                                    |  |                   |
| Po Box 2469  | 6  | 60440 Will County 1/2 interest Tennants in Common with sister As of the date you file, the claim is: Check all that   |                                    |  |                   |
| Po Box 2469<br>Columbus, C   | -  | 60440 Will County 1/2 interest Tennants in Common with sister  As of the date you file, the claim is: Check all that apply.   |                                    |  |                   |
|  | H 43224  | 60440 Will County 1/2 interest Tennants in Common with sister As of the date you file, the claim is: Check all that   |                                    |  |                   |
| Columbus, C  | H 43224  | 60440 Will County 1/2 interest Tennants in Common with sister  As of the date you file, the claim is: Check all that apply.  ☐ Contingent ☐ Unliquidated ☐ Disputed   |                                    |  |                   |
| Columbus, C  | OH 43224<br>r, State & Zip Code                                      | 60440 Will County 1/2 interest Tennants in Common with sister  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated  |                                    |  |                   |
| Columbus, C<br>Number, Street, City  | OH 43224<br>r, State & Zip Code                                      | 60440 Will County 1/2 interest Tennants in Common with sister  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or so  | ecured                             |  |                   |
| Columbus, C  Number, Street, City  Who owes the debt?  | OH 43224<br>r, State & Zip Code                                      | 60440 Will County 1/2 interest Tennants in Common with sister  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.   | ecured                             |  |                   |
| Columbus, C  Number, Street, City  Who owes the debt?  Debtor 1 only   | OH 43224  c, State & Zip Code  Check one.                            | 60440 Will County 1/2 interest Tennants in Common with sister  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or so  | ecured                             |  |                   |
| Columbus, Consumber, Street, City  Who owes the debt?  Debtor 1 only Debtor 2 only Debtor 1 and Debtor At least one of the debter                | OH 43224 , State & Zip Code  Check one.  r 2 only ebtors and another | 60440 Will County 1/2 interest Tennants in Common with sister  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or so car loan)  Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit | ecured                             |  |                   |
| Columbus, C  Number, Street, City  Who owes the debt?  Debtor 1 only Debtor 2 only Debtor 1 and Debtor   | OH 43224 , State & Zip Code  Check one.  r 2 only ebtors and another | 60440 Will County 1/2 interest Tennants in Common with sister  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or so car loan)  Statutory lien (such as tax lien, mechanic's lien)                              | ecured                             |  |                   |
| Columbus, Consumber, Street, City  Who owes the debt?  Debtor 1 only Debtor 2 only Debtor 1 and Debtor At least one of the dolumber.             | check one.  r 2 only ebtors and another relates to a                 | 60440 Will County 1/2 interest Tennants in Common with sister  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or so car loan)  Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit | ecured                             |  |                   |
| Columbus, C  Number, Street, City  Who owes the debt?  Debtor 1 only Debtor 2 only Debtor 1 and Debtor At least one of the d Check if this claim | OH 43224 , State & Zip Code  Check one.  r 2 only ebtors and another | 60440 Will County 1/2 interest Tennants in Common with sister  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or so car loan)  Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit | ecured                             |  |                   |
| Columbus, C  Number, Street, City  Who owes the debt?  Debtor 1 only Debtor 2 only Debtor 1 and Debtor At least one of the d Check if this claim | check one.  r 2 only ebtors and another relates to a  Opened         | 60440 Will County 1/2 interest Tennants in Common with sister  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or so car loan)  Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit | ecured                             |  |                   |

Add the dollar value of your entries in Column A on this page. Write that number here: If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$150,637.00 \$150,637.00

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

|   |   | Document   | Page 2                              | 1 of 54  |  |
|---|---|--|-------------------------------------|--|--|
| Fill in th  | is information to identify you  | ur case:   |                                     |  |  |
| Debtor 1  | Stella C Gomez  | !  |                                     |  |  |
|   | First Name  | Middle Name  | Last Name                           |  |  |
| Debtor 2 (Spouse if,  |   | Middle Name  | Last Name                           |  |  |
|   |   |  |                                     |  |  |
| United S  | states Bankruptcy Court for the   | : NORTHERN DISTRICT OF   | ILLINOIS                            |  |  |
| Case nu<br>(if known)                                       | mber  |  |                                     |  | Check if this is an amended filing                 |
| Sched   |   | Who Have Unsecure  |                                     | Part 2 for creditors with NONPRIORITY  | 12/15  |
| Schedule<br>Schedule<br>left. Attacl<br>name and<br>Part 1: | G: Executory Contracts and Une<br>D: Creditors Who Have Claims S<br>h the Continuation Page to this p<br>case number (if known).  List All of Your PRIORITY | expired Leases (Official Form 106G)<br>secured by Property. If more space in<br>page. If you have no information to in<br>Unsecured Claims | . Do not include<br>is needed, copy | contracts on Schedule A/B: Property (Of<br>any creditors with partially secured clai<br>the Part you need, fill it out, number the<br>do not file that Part. On the top of any a | ims that are listed in entries in the boxes on the |
| _   | ny creditors have priority unsecu   | ured claims against you?   |                                     |  |  |
| ■ N   | o. Go to Part 2.  |  |                                     |  |  |
| ☐ Ye  | <del></del>   |  |                                     |  |  |
| Part 2:   | List All of Your NONPRIOR   | RITY Unsecured Claims  |                                     |  |  |
| _   |   | secured claims against you?  | th your other sch                   | edules.  |  |
| unse  | cured claim, list the creditor separa<br>one creditor holds a particular clain  | tely for each claim. For each claim list   | ed, identify what                   | b holds each claim. If a creditor has more<br>type of claim it is. Do not list claims already<br>three nonpriority unsecured claims fill out                                     | included in Part 1. If more                        |
|   |   |  |                                     |  | Total claim  |
|   | Capital One / Menard  | Last 4 digits of a   | ccount number                       | 8545   | \$1,372.00   |
| 2   | Nonpriority Creditor's Name<br>26525 N Riverwoods Blvd<br>Mettawa, IL 60045   | When was the de  | ebt incurred?                       | Opened 07/09 Last Active 5/05/16   | _  |
|   | Number Street City State Zlp Code Who incurred the debt? Check or   | •  | u file, the claim                   | is: Check all that apply   |  |
| I   | Debtor 1 only   | ☐ Contingent   |                                     |  |  |
| I   | Debtor 2 only   | ☐ Unliquidated   |                                     |  |  |
| I   | Debtor 1 and Debtor 2 only  | ☐ Disputed   |                                     |  |  |
| l   | lacksquare At least one of the debtors and  |  | ORITY unsecure                      | d claim:   |  |
|   | Check if this claim is for a co   |  |                                     |  |  |
|   | debt<br>Is the claim subject to offset?   | Obligations ari report as priority c   |                                     | aration agreement or divorce that you did n  | ot   |
|   |   |  |                                     | ng plans, and other similar debts  |  |
|   | ■ Yes   | Other. Specify   | •                                   | • •  |  |
| '   | <b>–</b> 169  | Other. Specify   | Silai ge Aci                        | Journ .  |  |

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Debtor 1 Stella C Gomez Case number (if know) 4.2 Citibank / Sears Last 4 digits of account number 3346 \$1,713.00 Nonpriority Creditor's Name Citicard Credit Srvs/Centralized Opened 03/04 Last Active **Bankrup** When was the debt incurred? 5/05/16 Po Box 790040 Saint Louis, MO 63179 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes 4.3 Citibank/The Home Depot Last 4 digits of account number 2849 \$1,373.00 Nonpriority Creditor's Name Citicorp Credit Srvs/Centralized Opened 07/11 Last Active Bankrup When was the debt incurred? 06/16 Po Box 790040 Saint Louis, MO 63179 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Charge Account** Other. Specify 4.4 **Comenity Bank/Pier 1** Last 4 digits of account number 6347 \$264.00 Nonpriority Creditor's Name Opened 10/12 Last Active Po Box 182125 When was the debt incurred? 06/16 Columus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes

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Case number (if know) Debtor 1 Stella C Gomez 4.5 \$2,881.00 Kohls/Capital One Last 4 digits of account number 1386 Nonpriority Creditor's Name Opened 11/03 Last Active Po Box 3120 When was the debt incurred? 5/04/16 Milwaukee, WI 53201 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Charge Account 4.6 **Merchants Credit** Last 4 digits of account number 3540 \$356.00 Nonpriority Creditor's Name 223 W Jackson Blvd Opened 03/14 Last Active Ste 700 When was the debt incurred? 10/12 Chicago, IL 60606 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection Attorney Hinsdale Orthopaedics ☐ Yes 4.7 Synchrony Bank/QVC Last 4 digits of account number 4917 \$1,142.00 Nonpriority Creditor's Name Opened 10/10 Last Active Po Box 965064 When was the debt incurred? 06/16 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes

| Debto | or 1 Stella C Gomez   | Document Page 2  | 4 01 54<br>Case number (if know)                |            |
|-------|---|--|---|------------|
| 4.8   | Synchrony Bank/Walmart Nonpriority Creditor's Name                                    | Last 4 digits of account number                            | 1105  | \$922.00   |
|       | Po Box 965064<br>Orlando, FL 32896  | When was the debt incurred?                                | Opened 08/11 Last Active 5/01/16                |            |
|       | Number Street City State Zlp Code Who incurred the debt? Check one.                   | As of the date you file, the claim                         | is: Check all that apply                        |            |
|       | ■ Debtor 1 only   | ☐ Contingent   |   |            |
|       | Debtor 2 only   | ☐ Unliquidated   |   |            |
|       | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed   |   |            |
|       | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecure                               | d claim:  |            |
|       | ☐ Check if this claim is for a community  | ☐ Student loans  |   |            |
|       | debt Is the claim subject to offset?  | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not   |            |
|       | ■ No  | ☐ Debts to pension or profit-sharing                       | ng plans, and other similar debts               |            |
|       | ☐ Yes   | Other. Specify Charge Acc                                  | count   |            |
| 4.9   | Theressa Leal   | Last 4 digits of account number                            |   | \$10.00    |
|       | Nonpriority Creditor's Name   | When was the debt incurred?                                |   |            |
|       | Number Street City State Zlp Code   | As of the date you file, the claim                         | is: Check all that apply                        |            |
|       | Who incurred the debt? Check one.   |  |   |            |
|       | Debtor 1 only   | ☐ Contingent   |   |            |
|       | Debtor 2 only   | ☐ Unliquidated   |   |            |
|       | ☐ Debtor 1 and Debtor 2 only  | Disputed   |   |            |
|       | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecure                               | d claim:  |            |
|       | ☐ Check if this claim is for a community  | ☐ Student loans  |   |            |
|       | debt Is the claim subject to offset?  | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not   |            |
|       | No  | Debts to pension or profit-sharing                         | ng plans, and other similar debts               |            |
|       | ☐ Yes   | ■ Other. Specify <b>Disputed is jointly own</b>            | ssure relating to real estate<br>ed with Debtor |            |
| 4.1   | Visa Dept Store National Bank   | Last 4 digits of account number                            | 1940  | \$2,547.00 |
|       | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 8053                              | When was the debt incurred?                                | Opened 03/02 Last Active 5/01/16                |            |
|       | Mason, OH 45040  Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim                         | is: Check all that apply                        |            |
|       | ■ Debtor 1 only   | ☐ Contingent   |   |            |
|       | Debtor 2 only   | ☐ Unliquidated   |   |            |
|       | Debtor 1 and Debtor 2 only  | ☐ Disputed   |   |            |
|       | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecure                               | d claim:  |            |
|       | ☐ Check if this claim is for a community  | ☐ Student loans  |   |            |
|       | debt  | Obligations arising out of a sepa                          | aration agreement or divorce that you did not   |            |

#### Part 3: List Others to Be Notified About a Debt That You Already Listed

■ Other. Specify Charge Account

☐ Debts to pension or profit-sharing plans, and other similar debts

No

☐ Yes

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 Stella C Gomez

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

|              |     |   |     | -  | Total Claim |
|--------------|-----|---|-----|----|-------------|
|              | 6a. | Domestic support obligations  | 6a. | \$ | 0.00        |
| Total claims |     |   |     |    |             |
| from Part 1  | 6b. | Taxes and certain other debts you owe the government  | 6b. | \$ | 0.00        |
|              | 6c. | Claims for death or personal injury while you were intoxicated  | 6c. | \$ | 0.00        |
|              | 6d. | Other. Add all other priority unsecured claims. Write that amount here.                                 | 6d. | \$ | 0.00        |
|              | 6e. | Total Priority. Add lines 6a through 6d.  | 6e. | \$ | 0.00        |
|              |     |   |     |    | Total Claim |
|              | 6f. | Student loans   | 6f. | \$ | 0.00        |
| Total claims |     |   |     |    |             |
| from Part 2  | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ | 0.00        |
|              | 6h. |   | 6h. | \$ | 0.00        |
|              | 6i. | <b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.                       | 6i. | \$ | 12,580.00   |
|              | 6j. | Total Nonpriority. Add lines 6f through 6i.   | 6j. | \$ | 12,580.00   |

|                     |                          | 17/7/4/11/11      | 311 111111 7 17 17 17 |  |
|---------------------|--------------------------|-------------------|-----------------------|--|
| Fill in this infor  | mation to identify your  | case:             |                       |  |
| Debtor 1            | Stella C Gomez           |                   |                       |  |
|                     | First Name               | Middle Name       | Last Name             |  |
| Debtor 2            |                          |                   |                       |  |
| (Spouse if, filing) | First Name               | Middle Name       | Last Name             |  |
| United States Ba    | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS           |  |
| Case number         |                          |                   |                       |  |
| (if known)          |                          |                   |                       |  |
|                     |                          |                   |                       |  |

### Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

|     | Person or | r company with<br>Name, Number | h whom you have the er, Street, City, State and ZIP C | contract or lease | State what the contract or lease is for |
|-----|-----------|--------------------------------|---|-------------------|---|
| 2.1 |           |                                |   |                   |   |
|     | Name      |                                |   |                   | _                                       |
|     | Number    | Street                         |   |                   |   |
|     | City      |                                | State   | ZIP Code          | _                                       |
| 2.2 |           |                                |   |                   |   |
|     | Name      |                                |   |                   | _                                       |
|     | Number    | Street                         |   |                   | _                                       |
|     | City      |                                | State   | ZIP Code          |   |
| 2.3 | •         |                                |   |                   |   |
|     | Name      |                                |   |                   | _                                       |
|     | Number    | Street                         |   |                   | _                                       |
|     | City      |                                | State   | ZIP Code          | <del>_</del>                            |
| 2.4 | •         |                                |   |                   |   |
|     | Name      |                                |   |                   | _                                       |
|     | Number    | Street                         |   |                   | _                                       |
|     | City      |                                | State   | ZIP Code          | <del></del>                             |
| 2.5 |           |                                |   |                   |   |
|     | Name      |                                |   |                   | _                                       |
|     | Number    | Street                         |   |                   | _                                       |
|     | City      |                                | State   | ZIP Code          | <del>_</del>                            |
|     |           |                                |   |                   |   |

|  |  | Docume  | nt Page 27 d   | <u> </u>  |   |
|--|--|---|--|---|---|
| Fill in this i   | information to identify your   |   |  |   |   |
| Debtor 1   | Stella C Gomez   |   |  |   |   |
|  | First Name   | Middle Name   | Last Name  |   |   |
| Debtor 2   | Eight Name   | Middle Nove   | LastNama   |   |   |
| (Spouse if, filing   | g) First Name  | Middle Name   | Last Name  |   |   |
| United State   | es Bankruptcy Court for the:   | NORTHERN DISTRICT   | OF ILLINOIS  |   |   |
| Case numb  | er   |   |  |   |   |
| (if known)   |  |   |  |   | ☐ Check if this is an   |
|  |  |   |  |   | amended filing  |
| Official   | Form 106U  |   |  |   |   |
|  | Form 106H  |   |  |   |   |
| Sched  | ule H: Your Cod  | ebtors  |  |   | 12/15   |
| ■ No □ Yes  2. With Arizona ■ No. (□ Yes.)  3. In Column line: | a, California, Idaho, Louisiana, Go to line 3. Did your spouse, former spouse, Imn 1, list all of your codebt 2 again as a codebtor only i | I lived in a community pr<br>Nevada, New Mexico, Pu<br>use, or legal equivalent live<br>ors. Do not include your<br>f that person is a guaran | operty state or territor<br>erto Rico, Texas, Wash<br>with you at the time?<br>spouse as a codebtor<br>tor or cosigner. Make | ry? (Community proper,<br>iington, and Wisconsin.)<br>r if your spouse is filin<br>sure you have listed t | ty states and territories include )  ng with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fill |
|  | lumn 2.  | ,   | `  |   |   |
|  | Column 1: Your codebtor<br>ame, Number, Street, City, State and Z  | P Code  |  | Column 2: The cre<br>Check all schedul  | editor to whom you owe the debt es that apply:  |
|  |  |   |  | _   |   |
| 3.1  | lame   |   |  | Schedule D, lir   |   |
| IX.  | Maine  |   |  | ☐ Schedule E/F,   |   |
|  |  |   |  | ☐ Schedule G, lir   | ne  |
|  | lumber Street<br>City  | State   | ZIP Code   |   |   |
| C  | ліу  | State   | ZII <sup>2</sup> Gude  |   |   |
|  |  |   |  | _   |   |
| 3.2  | lomo   |   |  | Schedule D, lir   |   |
| N  | lame   |   |  | ☐ Schedule E/F,   |   |
|  |  |   |  | ☐ Schedule G, lir   | ne  |
|  | lumber Street  | Ctata   | 710.0-4-   |   |   |
| C  | City   | State   | ZIP Code   |   |   |

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| Fill        | in this information to identify your c   | ase:                       |                        |                  |                        |                        |               |                             |          |
|-------------|--|----------------------------|------------------------|------------------|------------------------|------------------------|---------------|-----------------------------|----------|
|             | otor 1 Stella C Goi  |                            |                        |                  |                        |                        |               |                             |          |
|             | otor 2  ouse, if filing)   |                            |                        |                  |                        |                        |               |                             |          |
| Uni         | ted States Bankruptcy Court for the  | e: NORTHERN DISTRI         | CT OF ILLINOIS         |                  |                        |                        |               |                             |          |
|             | se number<br>  |                            | -                      |                  | □ An                   |                        | nt showing    | postpetition<br>owing date: |          |
| 0           | fficial Form 106I  |                            |                        |                  | MN                     | Л / DD/ Y`             | YYY           |                             |          |
| S           | chedule I: Your Inc  | ome                        |                        |                  |                        | , 22, .                |               |                             | 12/15    |
| spo<br>atta | plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  The describe Employment information. | ır spouse is not filing w  | ith you, do not inclu  | de informatio    | on about y<br>case nur | your spo<br>nber (if k | use. If more  | e space is<br>swer every    | needed,  |
|             | If you have more than one job,   |                            | ■ Employed             |                  |                        | ☐ Emplo                |               | ig opedee                   |          |
|             | attach a separate page with information about additional   | Employment status          | ☐ Not employed         |                  |                        | □ Not en               | •             |                             |          |
|             | employers.   | Occupation                 | Retired                |                  |                        |                        |               |                             |          |
|             | Include part-time, seasonal, or self-employed work.  | Employer's name            | none                   |                  |                        |                        |               |                             |          |
|             | Occupation may include student or homemaker, if it applies.  | Employer's address         |                        |                  |                        |                        |               |                             |          |
|             |  | How long employed t        | here?                  |                  |                        | _                      |               |                             |          |
| Par         | t 2: Give Details About Mo   | nthly Income               |                        |                  |                        |                        |               |                             |          |
|             | mate monthly income as of the duse unless you are separated.   | ate you file this form. If | you have nothing to re | eport for any li | ine, write S           | \$0 in the             | space. Inclu  | ıde your no                 | n-filing |
|             | u or your non-filing spouse have me<br>e space, attach a separate sheet to   |                            | ombine the informatio  | n for all emplo  | oyers for th           | nat persor             | n on the line | s below. If                 | you need |
|             |  |                            |                        |                  | For Debt               | or 1                   | For Debt      |                             |          |
| 2.          | List monthly gross wages, sala deductions). If not paid monthly,   |                            |                        | 2. \$            |                        | 0.00                   | \$            | N/A                         |          |
| 3.          | Estimate and list monthly over   | time pay.                  |                        | 3. +\$           |                        | 0.00                   | +\$           | N/A                         |          |
| 1           | Calculate gross Income Add li  | no 2 i lino 2              |                        | 4 6              |                        | 200                    | ¢             | NI/A                        |          |

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| Deb | tor 1       | Stella C Gomez  | _   |           | Cas            | e number (if kr | nown) |             |                     |       |           |
|-----|-------------|---|-----|-----------|----------------|-----------------|-------|-------------|---------------------|-------|-----------|
|     |             |   |     |           | Fo             | or Debtor 1     |       | non         | Debtor<br>-filing s | pouse |           |
|     | Сор         | y line 4 here   | 4   |           | \$_            | C               | 0.00  | \$          |                     | N/A   | <u>\</u>  |
| 5.  | List        | all payroll deductions:   |     |           |                |                 |       |             |                     |       |           |
|     | 5a.         | Tax, Medicare, and Social Security deductions   |     | a.        | \$_            |                 | 0.00  | \$          |                     | N/A   |           |
|     | 5b.         | Mandatory contributions for retirement plans  |     | b.        | \$_            |                 | 0.00  | \$          |                     | N/A   |           |
|     | 5c.<br>5d.  | Voluntary contributions for retirement plans Required repayments of retirement fund loans   |     | C.        | \$<br>\$       |                 | 0.00  | \$_         |                     | N/A   |           |
|     | 5u.<br>5e.  | Insurance   |     | d.<br>e.  | φ <sub>-</sub> |                 | 0.00  | \$_<br>\$   |                     | N/A   |           |
|     | 5f.         | Domestic support obligations  |     | f.        | \$             |                 | 0.00  | \$_         |                     | N/A   |           |
|     | 5g.         | Union dues  | 5   | g.        | \$             |                 | 0.00  | \$          |                     | N/A   |           |
|     | 5h.         | Other deductions. Specify:  | _ 5 | h.+       | \$             | C               | 0.00  | + \$        |                     | N/A   | <u>\</u>  |
| 6.  | Add         | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.  | 6   |           | \$             | C               | 0.00  | \$          |                     | N/A   | <u>\</u>  |
| 7.  | Calc        | culate total monthly take-home pay. Subtract line 6 from line 4.  | 7   |           | \$_            | C               | 0.00  | \$          |                     | N/A   | <u>\</u>  |
| 8.  | List<br>8a. | all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total   |     |           |                |                 |       |             |                     |       |           |
|     | 01          | monthly net income.   |     | a.        | \$_            |                 | 0.00  | \$_         |                     | N/A   |           |
|     | 8b.<br>8c.  | Interest and dividends  Family support payments that you, a non-filing spouse, or a dependent   |     | b.        | \$_            | C               | 0.00  | \$          |                     | N/A   | <u>\</u>  |
|     | 8d.         | regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation  | 8   | c.<br>d.  | \$<br>\$       |                 | 0.00  | \$          |                     | N/A   | _         |
|     | 8e.         | Social Security   | 8   | e.        | \$             | 1,652           |       | \$          |                     | N/A   |           |
|     | 8f.         | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  Page ion a retionment income | 8   |           | \$<br>\$       |                 | 0.00  | \$          |                     | N/A   |           |
|     | 8g.<br>8h.  | Pension or retirement income Other monthly income. Specify: Dominicks pension   |     | g.<br>h.+ | · -            | 0<br>1,201      | 0.00  | *<br>+ \$   |                     | N/A   |           |
|     | OII.        | Oscar Meyer   | _ 0 | н.т       | \$             |                 | 3.00  | τυ <u> </u> |                     | N/A   | _         |
|     |             |   | _   |           | ,              |                 |       |             |                     | 14/7  | <u>`</u>  |
| 9.  | Add         | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  | 9   |           | \$_            | 3,261           | .00   | \$_         |                     | N/    | <b>A</b>  |
| 10. | Calc        | culate monthly income. Add line 7 + line 9.   | 10. | \$        |                | 3,261.00        | + \$  |             | N/A                 | = \$  | 3,261.00  |
|     | Add         | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  |     |           |                |                 |       |             |                     |       |           |
| 11. | Incluothe   | e all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:                                | dep |           |                |                 |       |             | Schedule<br>11.     |       | 0.00      |
| 12. |             | the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies   |     |           |                |                 |       |             | 12.                 | \$    |           |
| 13. | Dov         | you expect an increase or decrease within the year after you file this form   | ?   |           |                |                 |       |             |                     | month | ly income |
|     |             | No.  Yes. Explain:  |     |           |                |                 |       |             |                     |       |           |

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| FIII       | in this information to identify your case:   |   |             |  |                               |
|------------|--|---|-------------|--|-------------------------------|
| Deb        | otor 1 Stella C Gomez  |   | Chec        | ck if this is:                         |                               |
|            |  |   |             | An amended filing                      |                               |
|            | otor 2   |   |             | A supplement show<br>13 expenses as of | ving postpetition chapter     |
| (Spo       | ouse, if filing)   |   |             | rs expenses as or                      | the following date:           |
| Unit       | ted States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLING   | DIS                                     | -           | MM / DD / YYYY                         |                               |
| l          | se number  |   |             |  |                               |
| (If kı     | rnown)   |   |             |  |                               |
| Of         | fficial Form 106J  |   |             |  |                               |
| Sc         | chedule J: Your Expenses   |   |             |  | 12/15                         |
| Be<br>info | as complete and accurate as possible. If two married people are ormation. If more space is needed, attach another sheet to this fumber (if known). Answer every question.  |   |             |  |                               |
|            | rt 1: Describe Your Household  |   |             |  |                               |
| 1.         | Is this a joint case?  |   |             |  |                               |
|            | ■ No. Go to line 2.  |   |             |  |                               |
|            | ☐ Yes. Does Debtor 2 live in a separate household?   |   |             |  |                               |
|            | □ No   |   |             |  |                               |
|            | ☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses   | for Separate House                      | hold of Deb | tor 2.                                 |                               |
| ^          | De very have demandente?   |   |             |  |                               |
| 2.         | Do you have dependents? ■ No   |   |             |  |                               |
|            | Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent  | Dependent's relation Debtor 1 or Debtor |             | Dependent's age                        | Does dependent live with you? |
|            | Do not state the   |   |             |  | □ No                          |
|            | dependents names.  |   |             |  | ☐ Yes                         |
|            |  |   |             |  | □ No                          |
|            |  |   |             |  | Yes                           |
|            |  |   |             |  | □ No                          |
|            |  |   |             |  | ☐ Yes                         |
|            |  |   |             |  | □ No                          |
| 3.         | Do your expenses include ■ No  |   |             |  | ☐ Yes                         |
| ٥.         | expenses of people other than  |   |             |  |                               |
|            | yourself and your dependents?  |   |             |  |                               |
| Do         | t C. Cotimete Very Ongring Menthly Evyennes  |   |             |  |                               |
| Est<br>exp | t 2: Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless your enses as of a date after the bankruptcy is filed. If this is a suppliplicable date.   |   |             |  |                               |
| the        | clude expenses paid for with non-cash government assistance if a value of such assistance and have included it on Schedule I: You have included it on Schedule I: You have included it on Schedule II: You have included it on Schedule I |   |             | Your expe                              | enses                         |
| (Un        | fficial Form 106I.)  |   |             |  |                               |
| 4.         | The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot.  | clude first mortgage                    | e<br>4. \$  | \$                                     | 1,200.00                      |
|            | If not included in line 4:   |   |             |  |                               |
|            | 4a. Real estate taxes  |   | 4a. \$      | 8                                      | 0.00                          |
|            | 4b. Property, homeowner's, or renter's insurance   |   | 4a. \$      | · -                                    | 0.00                          |
|            | 4c. Home maintenance, repair, and upkeep expenses  |   | 4c. \$      |  | 0.00                          |
|            | 4d. Homeowner's association or condominium dues  |   | 4d. \$      |  | 0.00                          |
| 5.         | Additional mortgage payments for your residence, such as hon   | ne equity loans                         | 5. \$       |  | 0.00                          |

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| 6a. Electricity, heat, natural gas 6b. Weter, sewer, garbage collection 6b. Weter, sewer, garbage collection 6b. Weter, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. Other, Specify 7. Food and housekeeping supplies 7. \$ 5.000 8c. Chiter, Specify 8c. Chiter, Specify 9c. Clothing, laundry, and dry cleaning 9. \$ 750.00 8c. Clothing, laundry, and dry cleaning 9. \$ 175.00 9c. Clothing, laundry, and dry cleaning 9. \$ 175.00 9c. Clothing, laundry, and dry cleaning 9c. Services 9c. Clothing, laundry, and dry cleaning 9c. Services 9c. Clothing, laundry, and dry cleaning 9c. Services 9c. Clothing, laundry, and dry cleaning 9c. Clothing, laundry, l  | Debtor 1       | Stella C         | Gomez  | Case num | nber (if known) |                              |
|---|----------------|------------------|--|----------|-----------------|------------------------------|
| 6a. Electricity, heat, natural gas 6b. Weter, sewer, garbage collection 6b. Weter, sewer, garbage collection 6b. Weter, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. Other, Specify 7. Food and housekeeping supplies 7. \$ 5.000 8c. Chiter, Specify 8c. Chiter, Specify 9c. Clothing, laundry, and dry cleaning 9. \$ 750.00 8c. Clothing, laundry, and dry cleaning 9. \$ 175.00 9c. Clothing, laundry, and dry cleaning 9. \$ 175.00 9c. Clothing, laundry, and dry cleaning 9c. Services 9c. Clothing, laundry, and dry cleaning 9c. Services 9c. Clothing, laundry, and dry cleaning 9c. Services 9c. Clothing, laundry, and dry cleaning 9c. Clothing, laundry, l  | 6. Uti         | ilities:         |  |          |                 |                              |
| 6 b. Water, sewer, garbage collection 6 c. Telephone, cell phone, letterlet, satellite, and cable services 6 c. \$ 165.50 ed. Cher, Specity: 6 cl. \$ 165.00 ed. Cher, Specity: 6 cl. \$ 0.00 ed. \$ 0.00 | -              |                  | . heat. natural gas  | 6a.      | \$              | 220.00                       |
| 6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other, Specify: 6d. Specify: 7. Food and housekeeping supplies 7. Spood and housekeeping supplies 8. Spood and housekeeping supplies 9. Spood and housekeping supplies 9. Spood and housekepin  |                | -                | · · · · · · · · · · · · · · · · · · ·  |          | · ·             |                              |
| 6 d. Chier. Specify. Food and housekeping supplies For Food and Annual State Sta  | 6c.            |                  |  |          |                 |                              |
| 7. Food and housekeeping supplies 7. S  |                | •                |  |          | · -             |                              |
| 3. Childcare and children's education costs 9. Clothing, laundry, and dry cleaning 9. \$ 175,00   10. Clothing, laundry, and dry cleaning 9. \$ 175,00   10. Personal care products and services 10. \$ 0.00   11. Medical and dental expenses 11. \$ 100,00   12. \$ 0.00   13. \$ 0.00   14. Charitable contributions and religious donations 14. \$ 0.00   15. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 0.00   16. Charitable contributions and religious donations 14. \$ 0.00   16. Charitable contributions and religious donations 14. \$ 0.00   16. Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.   15a. Life insurance 15b. \$ 0.00   15b. Health insurance 15b. \$ 0.00   15c. Vehicle insurance 15b. \$ 0.00   15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.   15d. Other insurance. Specify: 15d. \$ 0.00   15d. Other insurance 2   |                |                  |  |          | · -             |                              |
| Clothing, laundry, and dry cleaning   9, \$   175,00     Personal care products and services   10, \$   0.00     Personal care products and services   11, \$   100,00     Transportation. Include gas, maintenance, bus or train fare.   12, \$   0.00     Transportation. Include gas, maintenance, bus or train fare.   12, \$   0.00     Charitable contributions and religious donations   12, \$   0.00     Charitable contributions and religious donations   14, \$   0.00     Charitable contributions and religious donations   15, \$   0.00     Charitable contributions and religious donations   15, \$   0.00     Transportation. Include insurance deducted from your pay or included in lines 4 or 20.   15a, Life insurance   15b, \$   0.00     Transportation. Include insurance   15b, \$   0.00     Transportation. Inc  |                |                  |  |          | ·               |                              |
| 10.   Personal care products and services   10.   \$ 0.00   |                |                  |  |          | •               |                              |
| 11. Medical and dental expenses   11. \$   100.00   |                | •                |  |          |                 |                              |
| 12. Transportation. Include gas, maintenance, bus or train fare.   0.00     13. Entertaliment, clubs, recreation, newspapers, magazines, and books   13. \$   0.00     14. Charitable contributions and religious donations   14. \$   0.00     15. Insurance.   0.00     15. Insurance   0.00     15. Health insurance deducted from your pay or included in lines 4 or 20.     15. Life insurance   15. \$   0.00     15. Vehicle insurance   15. \$   0.00     16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$   0.00     17. Installment or lease payments:   17. \$   0.00     17. Installment or lease payments:   17. \$   0.00     17. Car payments for Vehicle 2   17. \$   0.00     17. Car payments for Vehicle 2   17. \$   0.00     17. Car payments for Vehicle 2   17. \$   0.00     17. Car payments for Vehicle 2   17. \$   0.00     17. Car payments for Vehicle 2   17. \$   0.00     18. Vour payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). \$   0.00     18. Vour payments you make to support others who do not live with you. \$   0.00     19. Other payments you make to support others who do not live with you. \$   0.00     20. Real estate taxes   0.00   \$   0.00     20. Real estate taxes   0.00   0.00     20. Poperty, homeowner's, or renter's insurance   20. \$   0.00  |                | -                |  |          | ·               |                              |
| Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Entertainment of the insurance Do not include insurance deducted from your pay or included in lines 4 or 20. 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15c. Vehicle insurance 15d. Vehicle insurance Speeliy 15d. Vehicle insurance Speeliy 15d. Vehicle insurance Vehicle 1 17d. Vehicle insurance Vehicle 1 17a. Very payments for Vehicle 1 17b. Very payments for Vehicle 1 17c. Vehicle, Speeliy: 17d. Vehicle, Vehicle 1 17d. Vehicle, Vehicle 1 17d. Vehicle, Vehicle 2 17d.   |                |                  | •  | 11.      | Ψ               | 100.00                       |
| 13. Entertainment, clubs, recreation, newspapers, magazines, and books   13. \$ 0.00  |                |                  |  | 12.      | \$              | 0.00                         |
| 1.5   Insurance   1.5   |                |                  | 1 7  | 13.      | \$              | 0.00                         |
| 15. Insurance.   15a. Life insurance deducted from your pay or included in lines 4 or 20.   15a. Life insurance   15b. \$   0.00   15b. Health insurance   15b. \$   0.00   15b. Other insurance. Specify:   15d. Other insurance. Specify:   15d. \$   0.00   15d. Other insurance. Specify:   15d. \$   0.00   15b. Specify:   15d. \$   0.00   15b. Specify:   15d. \$   0.00   15b. Specify:   17a. Specify:   17a. Specify:   17a. Specify:   17a. Specify:   17b. Specify:   17b. Specify:   17c. Specify:   17c. Specify:   17c. Specify:   17d. Sp   |                |                  |  |          | · -             |                              |
| Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. S. 0.00 15b. Health insurance 15c. Vehicle insurance. Specify: 15d. S. 0.00 15d. Other insurance. Specify: 15d. S. 0.00 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17a. Car payments for Vehicle 1 17b. S. 0.00 17c. Cher. Specify: 17d. Car payments for Vehicle 2 17b. S. 0.00 17c. Other. Specify: 17d. S. 0.00 17d. Other. Specify: 17  |                |                  |  |          | <u> </u>        | 0.00                         |
| 15a. Life insurance   | -              |                  | nsurance deducted from your pay or included in lines 4 or 20.                |          |                 |                              |
| 15b. Health insurance   15b. \$   0.00     15c. Vehicle insurance   15c. Vehicle   15c. Ve   |                |                  |  | 15a.     | \$              | 0.00                         |
| 15c. Vehicle insurance. Specify: 15d. Other insurance. Specify: 15d. Other insurance. Specify: 15d. Other insurance. Specify: 15d. Starker. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 15d. Specify: 15d. Car payments for Vehicle 1 15d. Starker. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 15d. Car payments for Vehicle 1 15d. Starker. Specify: 15d. Car payments for Vehicle 1 15d. Car payments for Vehicle 2 15d. Other. Specify: 15d. Other payments or alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 106I). Specify: 15d. Other payments you make to support others who do not live with you. Specify: 15d. Other real property expenses not included in lines 4 or 5 of this form or on Schedule 1: Your Income. 20a. Mortgages on other property 20a. Specify: 20b. Real estate taxes 20b. Specify: 20c. Property, homeowner's, or renter's insurance 20c. Specify: 20d. Maintenance, repair, and upkeep expenses 22d. Add lines 4 through 21. 22d. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22d. Add lines 24 and 22b. The result is your monthly expenses. 23d. Copy line 12 (your combined monthly income) from Schedule 1. 23a. Subtract your monthly expenses from your monthly expenses or decrease because of a modification to the terms of your mortgage?   | 15l            | b. Health ins    | surance  | 15b.     | \$              |                              |
| 15d. Other insurance. Specify: 15d. Other insurance. Specify: 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 15pecify: 15pecify: 16. \$ 0.00 17b. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. \$ 450.00 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other. Specify: 18 Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 1061). 18 Your payments you make to support others who do not live with you. 19 Other payments you make to support others who do not live with you. 19 Other real property expenses not included in lines 4 or 5 of this form or on Schedule 1: Your Income. 20a. Mortgages on other property 20a. \$ 0.00 20b. Real estate taxes 20b. \$ 0.00 20c. Property, homeowner's, or renter's insurance 20c. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 20e. Homeowner's association or condominium dues 20e. \$ 0.00 21c. Other: Specify: 21c. Calculate your monthly expenses 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add lines 4 through 21. 23a. Copy line 12 (your combined monthly income) from Schedule 1. 23a. Copy line 12 (your combined monthly income) from Schedule 1. 23a. Subtract your monthly expenses from your monthly expenses within the year after you file this form? For example, do you expect to linish paying for your car loan within the year of do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?   | 150            | c. Vehicle in    | surance  | 15c.     | \$              |                              |
| Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:  1. Installment or lease payments:  1. Car payments for Vehicle 1 1. Ta. S 450.00 1. Tb. Car payments for Vehicle 2 1. Tb. S 0.00 1. Tc. Cher. Specify: 1. Tc. S 0.00 1. Other. Specify: 1. Tc. S 0.00 1. Other. Specify: 1. To up ayments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 1. Other payments you make to support others who do not live with you. 1. Specify: 1. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes 20b. \$ 0.00 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 20e. Homeowner's association or condominium dues 20e. \$ 0.00 20e. Homeowner's association or condominium dues 21. Other: Specify: 22c. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23b. Copy your monthly expenses from Jour monthly expenses from Jour monthly expenses from Jour monthly expenses from Jour monthly income. 23c. Subtract your monthly expenses from your monthly income. 23c. Subtract your monthly expenses from your monthly income. 23c. Subtract your monthly expenses from your monthly income. 23c. Subtract your monthly expenses from your monthly income. 23c. Subtract your monthly expenses from your monthly income. 23c. Subtract your monthly expenses from your monthly income. 24d. Do you expect an increase or decrease in your expenses within the year of do you expect your mortgage payment to increase or decrease because of a modification to the terms of you  | 150            | d. Other insu    | urance. Specify:   |          |                 |                              |
| Specify: 16. \$ 0.00  Installment or lease payments: 17a. Car payments for Vehicle 1 17a. \$ 450.00  17b. Car payments for Vehicle 2 17b. \$ 0.00  17c. Other. Specify: 17c. \$ 0.00  17d. Other. Specify: 17c. \$ 0.00  17d. Other. Specify: 17d. \$ 0.00  18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 106i). \$ 0.00  19. Other payments you make to support others who do not live with you. \$ 0.00  Specify: 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule 1: Your Income.  20a. Mortgages on other property 20b. \$ 0.00  20b. Real estate taxes 20b. \$ 0.00  20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00  20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00  20d. Homeowner's association or condominium dues 20e. \$ 0.00  20f. Other: Specify: 21. +\$ 0.00  20f. Other: Specify: 21. +\$ 0.00  20f. Calculate your monthly expenses for Debtor 2), if any, from Official Form 106J-2 \$ 3,200.00  22c. Calculate your monthly net income.  23a. Copy line 12 (your combined monthly income) from Schedule 1. 23a. \$ 3,200.00  23b. Copy your monthly expenses from your monthly expenses 23c. Subtract your monthly expenses from your monthly income. The result is your monthly expenses in your expenses within the year after you file this form?  For example, do you expect to linish paying for your car loan within the year of do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?   |                |                  |  |          | <u> </u>        | 0.00                         |
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| ■ INO.  |                | No.              |  |          |                 |                              |
| ☐ Yes. Explain here:  |                |                  | Explain here:  |          |                 |                              |

# Case 16-26723 Doc 1 Filed 08/19/16 Entered 08/19/16 15:20:10 Desc Main Document Page 32 of 54

| Fill in this info               | rmation to identify your  | case:                    |                            |                         |  |
|---------------------------------|---|--------------------------|----------------------------|-------------------------|--|
| Debtor 1                        | Stella C Gomez  |                          |                            |                         |  |
|                                 | First Name  | Middle Name              | Last Name                  |                         |  |
| Debtor 2<br>(Spouse if, filing) | First Name  | Middle Name              | Last Name                  |                         |  |
| United States E                 | Bankruptcy Court for the:   | NORTHERN DISTRICT        | OF ILLINOIS                |                         |  |
| Case number<br>(if known)       |   |                          |                            |                         | ☐ Check if this is an amended filing                                       |
| Official For                    | rm 106Dec   |                          |                            |                         |  |
| Declara                         | tion About a  | n Individual             | Debtor's So                | chedules                | 12/15  |
| years, or both.                 | ey or property by fraud ir<br>18 U.S.C. §§ 152, 1341, 1<br>gn Below |                          | ruptcy case can result     | in fines up to \$250,00 | 00, or imprisonment for up to 20   |
| Did you p                       | pay or agree to pay some  | one who is NOT an attor  | ney to help you fill out l | bankruptcy forms?       |  |
| ■ No                            |   |                          |                            |                         |  |
| ☐ Yes.                          | Name of person  |                          |                            |                         | kruptcy Petition Preparer's Notice,<br>, and Signature (Official Form 119) |
|                                 | nalty of perjury, I declare are true and correct.                   | that I have read the sum | mary and schedules file    | ed with this declaratio | on and   |
|                                 | ella C Gomez  |                          | X                          |                         |  |
|                                 | a C Gomez<br>ture of Debtor 1                                       |                          | Signature of               | Debtor 2                |  |

Date

Date August 19, 2016

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|                                    | nation to identify your | case:   |  |   |                                     |
|------------------------------------|-------------------------|---|--|---|-------------------------------------|
| Debtor 1                           | Stella C Gomez          |   |  |   |                                     |
| Debtor 2                           | First Name              | Middle Name   | Last Name  |   |                                     |
| (Spouse if, filing)                | First Name              | Middle Name   | Last Name  |   |                                     |
| United States Ba                   | nkruptcy Court for the: | NORTHERN DISTRICT                                   | OF ILLINOIS  |   |                                     |
| Case number (if known)             |                         |   |  | ☐ Check i   | f this is an<br>ed filing           |
| Official Form                      |                         |   | Dabtaula Cab   | - dele  |                                     |
| Declarat                           | ion About a             | in individual                                       | Debtor's Sch   | edules  | 12/15                               |
| You must file this obtaining money | s form whenever you fi  | le bankruptcy schedules<br>n connection with a bank | nsible for supplying correc<br>or amended schedules. M<br>ruptcy case can result in fi | aking a false statement, concealing<br>ines up to \$250,000, or imprisonmer | property, or<br>nt for up to 20     |
| Sign                               | Below                   |   |  |   |                                     |
| Did you pay                        | or agree to pay some    | one who is NOT an attorn                            | ney to help you fill out ban   | kruptcy forms?  |                                     |
|                                    |                         |   |  |   |                                     |
| ■ No                               |                         |   |  |   |                                     |
| ■ No                               | lame of person          |   |  | Attach Bankruptcy Petition Pre<br>Declaration, and Signature (Of            | oarer's Notice,<br>ficial Form 119) |

Date June 18, 2016

Date

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| Fill               | in this                 | information to identify you  | r case:                                    |            |  |                                 |               |   |
|--------------------|-------------------------|--|--|------------|--|---------------------------------|---------------|---|
| Deb                | otor 1                  | Stella C Gomez   |  |            |  |                                 |               |   |
|                    |                         | First Name   | Middle Name                                |            | Last Name                                      |                                 |               |   |
|                    | otor 2<br>use if, filin | ng) First Name   | Middle Name                                |            | Last Name                                      |                                 |               |   |
| Uni                | ted Stat                | tes Bankruptcy Court for the:  | NORTHERN DISTRICT                          | OF ILL     | INOIS  |                                 |               |   |
|                    | se numt<br>own)         | ber  |  |            |  |                                 | _             | neck if this is an<br>nended filing                   |
| Sta                | atem                    | Form 107  nent of Financial  |  |            |  |                                 |               | 4/1   |
| info               | rmatior                 | n. If more space is needed<br>known). Answer every que                                   | , attach a separate sheet to               |            |  |                                 |               |   |
| Par                | t 1:                    | Give Details About Your Ma   | arital Status and Where Yo                 | ou Live    | d Before                                       |                                 |               |   |
| 1.                 | What i                  | is your current marital state  | us?  |            |  |                                 |               |   |
|                    | _                       | Married<br>lot married   |  |            |  |                                 |               |   |
| 2.                 | During                  | g the last 3 years, have you   | lived anywhere other than                  | n where    | you live now?                                  |                                 |               |   |
|                    | _                       | lo<br>'es. List all of the places you  | lived in the last 3 years. Do              | not inclu  | ude where you live now                         | ı.                              |               |   |
|                    | Debto                   | or 1 Prior Address:  | Dates Debtor flived there                  | 1          | Debtor 2 Prior Ad                              | dress:                          |               | Dates Debtor 2<br>lived there                         |
| <b>3.</b><br>state |                         | n the last 8 years, did you e<br>territories include Arizona, Ca                         |  |            |  |                                 |               |   |
|                    | ■ N                     | lo<br>′es. Make sure you fill out <i>Sc</i>  | hedule H: Your Codebtors (0                | Official I | Form 106H).                                    |                                 |               |   |
| Par                | t 2                     | Explain the Sources of You   | ır Income                                  |            |  |                                 |               |   |
| 4.                 | Fill in t               | ou have any income from enthe total amount of income you are filing a joint case and you | ou received from all jobs and              | l all bus  | inesses, including part-                       | time activities.                | revious calen | dar years?  |
|                    | _                       | lo<br>'es. Fill in the details.  |  |            |  |                                 |               |   |
|                    |                         |  | Debtor 1                                   |            |  | Debtor 2                        |               |   |
|                    |                         |  | Sources of income<br>Check all that apply. | (be        | oss income<br>fore deductions and<br>clusions) | Sources of in<br>Check all that |               | Gross income<br>(before deductions<br>and exclusions) |

| Debto           |                      | Case 16<br>ella C Gor        | -26723<br>nez                    | Doc 1                                | Filed 08/19<br>Documen  |                         | age 35 of 54  | 19/16 15:20:2<br>4<br>se number ( <i>if known</i> ) | 10 Des                      | sc Main   |
|-----------------|----------------------|------------------------------|----------------------------------|--------------------------------------|---|-------------------------|---|---|-----------------------------|---|
| 5. D            |                      |                              |                                  | e during this                        | s year or the two   | previous                |   |   |                             |   |
| ar              | nd other             | public bene                  | fit payments;                    | pensions; re                         | ntal income; intere   | est; divide             | nds; money colle  |   | royalties; ar               | Security, unemployment,<br>nd gambling and lottery      |
| Li              | st each s            | source and                   | the gross inco                   | me from ea                           | ch source separate  | ely. Do no              | t include income  | that you listed in lin                              | ne 4.                       |   |
|                 | ] No                 |                              |                                  |                                      |   |                         |   |   |                             |   |
|                 | Yes.                 | Fill in the de               | etails.                          |                                      |   |                         |   |   |                             |   |
|                 |                      |                              |                                  | Debtor 1<br>Sources of<br>Describe b |   | each s                  | deductions and  | Debtor 2<br>Sources of inc<br>Describe below        |                             | Gross income<br>(before deductions<br>and exclusions)   |
|                 |                      | 1 of curre<br>iled for bar   | nt year until<br>nkruptcy:       | SS and to                            | wo pensions   |                         | \$15,000.00   |   |                             |   |
|                 |                      | dar year:<br>December        | 31, 2015 )                       | SS and to                            | wo pensions   |                         | \$32,000.00   |   |                             |   |
|                 |                      | dar year be<br>December      |                                  | SS and to                            | wo pensions   |                         | \$31,000.00   |   |                             |   |
|                 |                      |                              | · · ·                            |                                      |   |                         |   |   |                             |   |
| Part 3          | List                 | Certain Pa                   | yments You                       | Made Befo                            | re You Filed for B  | Bankrupto               | СУ  |   |                             |   |
| 6. A            | _                    | Neither D                    | ebtor 1 nor D                    | ebtor 2 has                          | marily consumer<br>s primarily consuments<br>of the consuments of the consumers | mer debt                |   | ots are defined in 11                               | U.S.C. § 10                 | 01(8) as "incurred by an                                |
|                 |                      | During the                   | 90 days befo                     | re you filed                         | for bankruptcy, did   | d you pay               | any creditor a tot  | al of \$6,425* or mo                                | re?                         |   |
|                 |                      | □ No.                        | Go to line 7                     | -                                    | , ,   | , , ,                   | ·   |   |                             |   |
|                 |                      | ☐ Yes                        | paid that cr                     | editor. Do no                        |   | ts for dom              | estic support obli  |   |                             | the total amount you and alimony. Also, do              |
|                 |                      | * Subject                    | to adjustmen                     | t on 4/01/19                         | and every 3 years   | after that              | for cases filed or  | n or after the date o                               | f adjustmen                 | t.  |
|                 | Yes.                 |                              |                                  |                                      | primarily consult<br>for bankruptcy, did  |                         |   | al of \$600 or more?                                | •                           |   |
|                 |                      | ■ No.                        | Go to line 7                     |                                      |   |                         |   |   |                             |   |
|                 |                      | □ Yes                        | include pay                      |                                      | mestic support ob   |                         |   | nd the total amount pport and alimony.              |                             | at creditor. Do not include payments to an              |
| C               | reditor'             | s Name an                    | d Address                        |                                      | Dates of paymer   | nt                      | Total amount paid   | Amount you still owe                                | Was this                    | payment for   |
| <i>In</i><br>of | siders in<br>which y | clude your i<br>ou are an of | elatives; any<br>ficer, director | general part<br>, person in c        | ners; relatives of a ontrol, or owner of  | any gener<br>f 20% or r | t on a debt you on<br>al partners; partn<br>more of their votin | owed anyone who<br>erships of which yo              | u are a gene<br>ny managing | eral partner; corporations<br>g agent, including one fo |

alimony.

|   | N  | ( |
|---|----|---|
| _ | IV | ľ |

☐ Yes. List all payments to an insider.

**Insider's Name and Address** Dates of payment Total amount Amount you Reason for this payment paid still owe

Case 16-26723 Doc 1 Filed 08/19/16 Entered 08/19/16 15:20:10 Page 36 of 54 Case number (if known) Document Debtor 1 Stella C Gomez Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an 8. insider? Include payments on debts guaranteed or cosigned by an insider. Nο Yes. List all payments to an insider **Insider's Name and Address Total amount** Amount you Reason for this payment Dates of payment Include creditor's name still owe paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Case title Nature of the case Status of the case Court or agency Case number Gomez v Leal issues related to Will Co □ Pending joint tennancy **Joliet** □ On appeal property Concluded Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address Describe the Property** Value of the Date property **Explain what happened** 

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

■ No

☐ Yes. Fill in the details.

Creditor Name and Address

Describe the action the creditor took

Date action was Amount taken

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

No

☐ Yes

Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

No

Address:

☐ Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 per person

Person to Whom You Gave the Gift and

Describe the gifts

Dates you gave the gifts

Value

|     |                             | Case 10-20723 Duc  |                      | Jeanwort  | Enlereu Uo                   |                | 0.20.10 Desc                                  | Main                    |
|-----|-----------------------------|--|----------------------|---|------------------------------|----------------|---|-------------------------|
| Del | otor 1                      | Stella C Gomez   | L                    | Document  | Page 37 of 5                 | ase number (   | if known)                                     |                         |
| 14. |                             | n 2 years before you filed for bank  |                      |   | s or contribution            | s with a total | value of more than                            | \$600 to any charity?   |
|     | □ `                         | Yes. Fill in the details for each gift or  | contributi           | on.   |                              |                |   |                         |
|     | more<br>Char                | s or contributions to charities that<br>e than \$600<br>rity's Name<br>ress (Number, Street, City, State and ZIP Coc   |                      | Describe what yo                                | u contributed                |                | Dates you contributed                         | Value                   |
| Par | rt 6:                       | List Certain Losses  |                      |   |                              |                |   |                         |
| 15. |                             | n 1 year before you filed for bankrumbling?  | uptcy or             | since you filed for I                           | oankruptcy, did y            | ou lose anytl  | ning because of the                           | t, fire, other disaster |
|     |                             | No<br>Yes. Fill in the details.  |                      |   |                              |                |   |                         |
|     | Desc                        | cribe the property you lost and  | Descril              | be any insurance co                             | overage for the lo           | SS             | Date of your                                  | Value of property       |
|     |                             | Describe the property you lost and how the loss occurred  Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.  Date of your loss loss loss loss loss loss loss los |                      |   |                              |                |   |                         |
| Par | rt 7:                       | List Certain Payments or Transfer  | ·s                   |   |                              |                |   |                         |
|     | Pers<br>Addi<br>Ema<br>Pers | il or website address<br>on Who Made the Payment, if Not   | You                  | Description and v<br>transferred                | alue of any prope            | erty           | Date payment or transfer was made             | Amount of<br>payment    |
| 17. | prom<br>Do no               | n 1 year before you filed for bankruised to help you deal with your crept include any payment or transfer that  No  Yes, Fill in the details.  | ditors or            | r to make payments                              |                              |                | r transfer any prope                          | rty to anyone who       |
|     |                             | on Who Was Paid  |                      | Description and v transferred                   | alue of any prope            | erty           | Date payment or transfer was made             | Amount of payment       |
| 18. | Includinclud                | n 2 years before you filed for bank<br>ferred in the ordinary course of you<br>de both outright transfers and transfer<br>de gifts and transfers that you have al<br>No<br>Yes. Fill in the details.                           | ur busin<br>s made a | ess or financial affa<br>as security (such as t | iirs?<br>he granting of a se |                | •   |                         |
|     | Pers<br>Addi                | on Who Received Transfer   |                      | Description and v property transferr            |                              |                | ny property or<br>received or debts<br>change | Date transfer was made  |
|     |                             | . ,  |                      |   |                              |                |   |                         |

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

No

Yes. Fill in the details.

Name of trust Description and value of the property transferred **Date Transfer was** made

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Case number (if known) Document

Debtor 1 Stella C Gomez

| Pa  | rt Cr. List of Cortain Financial Associate Inc   | strumente Safa Danaci   | t Payor and S                         | torogo Uni  | ita  |   |  |  |
|-----|--|---|---------------------------------------|-------------|--|---|--|--|
|     | Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, o houses, pension funds, cooperatives, association.                              | y, were any financial ac                                      | counts or inst                        | ruments he  | eld in your name, or for y                           |   |  |  |
|     | Name of Financial Institution and<br>Address (Number, Street, City, State and ZIP<br>Code)   | Last 4 digits of account number                               | Type of acco                          | ount or     | Date account was closed, sold, moved, or transferred | Last balance<br>before closing or<br>transfer |  |  |
| 21. | Do you now have, or did you have within 1 y cash, or other valuables?  | ear before you filed fo                                       | r bankruptcy, a                       | ıny safe de | eposit box or other depos                            | sitory for securities,                        |  |  |
|     | ■ No □ Yes. Fill in the details.   |   |                                       |             |  |   |  |  |
|     | Name of Financial Institution<br>Address (Number, Street, City, State and ZIP Code)  | Who else had acc<br>Address (Number, S<br>State and ZIP Code) |                                       | Describe    | the contents   | Do you still have it?                         |  |  |
| 22. | Have you stored property in a storage unit o  No Yes, Fill in the details.   | or place other than you                                       | r home within '                       | 1 year befo | re you filed for bankrupt                            | cy?   |  |  |
|     | Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  | to it?  | to it? Address (Number, Street, City, |             | the contents   | Do you still have it?                         |  |  |
| Pa  | rt 9: Identify Property You Hold or Control  | ,   |                                       |             |  |   |  |  |
| 23. | Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.   |   |                                       |             |  |   |  |  |
|     | ■ No □ Yes. Fill in the details.   |   |                                       |             |  |   |  |  |
|     | Owner's Name<br>Address (Number, Street, City, State and ZIP Code)   | Where is the pro<br>(Number, Street, City, S<br>Code)         |                                       | Describe    | the property   | Value   |  |  |
| Pa  | rt 10: Give Details About Environmental Info   | ormation  |                                       |             |  |   |  |  |
| For | the purpose of Part 10, the following definition   | ons apply:  |                                       |             |  |   |  |  |
|     | Environmental law means any federal, state toxic substances, wastes, or material into the regulations controlling the cleanup of these   | ne air, land, soil, surfac                                    | e water, groun                        | • .         |  |   |  |  |
|     | Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. |   |                                       |             |  |   |  |  |
|     | Hazardous material means anything an envi<br>hazardous material, pollutant, contaminant,   |   | as a hazardou                         | s waste, ha | azardous substance, tox                              | ic substance,                                 |  |  |
| Rep | port all notices, releases, and proceedings that   | at you know about, reg  | ardless of whe                        | n they occ  | urred.   |   |  |  |
| 24. | Has any governmental unit notified you that  | you may be liable or p  | otentially liable                     | e under or  | in violation of an enviror                           | mental law?                                   |  |  |
|     | ■ No □ Yes. Fill in the details.   |   |                                       |             |  |   |  |  |
|     | Name of site   | Governmental un   | .i4                                   | Envir       | conmontal law if you                                 | Data of notice                                |  |  |

Address (Number, Street, City, State and

ZIP Code)

know it

Address (Number, Street, City, State and ZIP Code)

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| 25.           | Hav  | e you notified any governmental unit of   | any release of hazardous material?   |       |  |                    |  |  |  |
|---------------|--|---|--|-------|--|--------------------|--|--|--|
|               | _  | No  |  |       |  |                    |  |  |  |
|               | _  | Yes. Fill in the details.   |  |       |  |                    |  |  |  |
|               |  | me of site dress (Number, Street, City, State and ZIP Code)   | Governmental unit Address (Number, Street, City, State and ZIP Code)   |       | Environmental law, if you<br>know it                   | Date of notice     |  |  |  |
| 06            | Цол  | ro vou boon a party in any judicial or adr  | · ·  |       | nontal law? Include cottlements                        | and orders         |  |  |  |
| 20.           | пач  | e you been a party in any judicial or adr   | ministrative proceeding under any envir  | OIIII | ental law? Include Settlements                         | and orders.        |  |  |  |
|               |  | No  |  |       |  |                    |  |  |  |
|               | П  | Yes. Fill in the details.   | Occupation of the control of the con | NI-1- |  | 01-1               |  |  |  |
|               |  | se Title<br>se Number   | Court or agency Name Address (Number, Street, City, State and ZIP Code)  | Nati  | ure of the case  | Status of the case |  |  |  |
| Par           | t 11:  | Give Details About Your Business or   | Connections to Any Business  |       |  |                    |  |  |  |
| 7             | \A/:+I   | hin 4 years before you filed for bankrup  | toy did you own a business or have an  |       | the following connections to ar                        | ny husiness?       |  |  |  |
| ٠,,           | VVIL   | ·   | in a trade, profession, or other activity, (   |       | •  | iy business:       |  |  |  |
|               |  | _   |  |       |  |                    |  |  |  |
|               |  | _   | pany (LLC) or limited liability partnershi   | р (ш  | -r)  |                    |  |  |  |
|               |  | ☐ A partner in a partnership  |  |       |  |                    |  |  |  |
|               |  | ☐ An officer, director, or managing ex  | •  |       |  |                    |  |  |  |
|               |  | ☐ An owner of at least 5% of the voting or equity securities of a corporation   |  |       |  |                    |  |  |  |
|               |  | No. None of the above applies. Go to Part 12.   |  |       |  |                    |  |  |  |
|               | Yes. Check all that apply above and fill in the details below for each business. |   |  |       |  |                    |  |  |  |
|               |  | siness Name   | Describe the nature of the business  |       | Employer Identification number                         |                    |  |  |  |
|               |  | dress<br>mber, Street, City, State and ZIP Code)  | Name of accountant or bookkeeper   |       | Do not include Social Security  Dates business existed | number of frint.   |  |  |  |
| 28.           |  | hin 2 years before you filed for bankrupt<br>itutions, creditors, or other parties.   | tcy, did you give a financial statement to   | o an  | yone about your business? Incl                         | lude all financial |  |  |  |
|               |  | No  |  |       |  |                    |  |  |  |
|               |  | Yes. Fill in the details below.   |  |       |  |                    |  |  |  |
|               |  | me  | Date Issued  |       |  |                    |  |  |  |
|               |  | dress mber, Street, City, State and ZIP Code)   |  |       |  |                    |  |  |  |
| Par           | t 12:  | Sign Below  |  |       |  |                    |  |  |  |
| are t<br>vith | true<br>a ba   | ead the answers on this Statement of Fir<br>and correct. I understand that making a<br>ankruptcy case can result in fines up to<br>5. §§ 152, 1341, 1519, and 3571. | false statement, concealing property, o  | r ob  | taining money or property by fr                        |                    |  |  |  |
|               |  | la C Gomez<br>C Gomez   | Signature of Debtor 2  |       |  |                    |  |  |  |
|               |  | re of Debtor 1  | 0.3 0 0. 20000. 2  |       |  |                    |  |  |  |
| Dat           | e _  | August 19, 2016   | Date   |       |  |                    |  |  |  |
| Did∶<br>□ N   | •  | attach additional pages to Your Stateme   | ent of Financial Affairs for Individuals F   | iling | for Bankruptcy (Official Form 1                        | 107)?              |  |  |  |
| Y             | 'es  |   |  |       |  |                    |  |  |  |
| Did :         | •  | pay or agree to pay someone who is no   | t an attorney to help you fill out bankrup   | ptcy  | forms?   |                    |  |  |  |
|               |  | Name of Person Attach the Bankru  |  |       |  |                    |  |  |  |
| Offici        | al Fo  | rm 107 Statem   | nent of Financial Affairs for Individuals Filing   | for B | ankruptcy  | page 6             |  |  |  |

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Debtor 1 Stella C Gomez

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| Fill in this inform    | nation to identify your                            | case:              |               |                         |                      |  |                      |
|------------------------|--|--------------------|---------------|-------------------------|----------------------|--|----------------------|
| Debtor 1               | Stella C Gomez                                     |                    |               |                         |                      |  |                      |
| Debtor 2               | First Name   | Middle Name        |               | Last Name               |                      |  |                      |
| (Spouse if, filing)    | First Name   | Middle Name        | )             | Last Name               |                      |  |                      |
| United States Ba       | nkruptcy Court for the:                            | NORTHERN D         | ISTRICT OF    | ILLINOIS                |                      |  |                      |
| Case number            |  |                    |               |                         |                      |  |                      |
| (if known)             |  |                    |               |                         |                      | Check if this amended filing                             |                      |
| Official Fo            | rm 107   |                    |               |                         |                      |  |                      |
| <del></del>            | of Financial A                                     | Affaire for I      | امطنينط       | iolo Filina f           | D (                  |  |                      |
|                        |  |                    |               |                         |                      |  | 4/16                 |
|                        | ore space is needed, a<br>n). Answer every quest   | illach a sebarate  | sheet to th   | is form. On the top     | of any additional p  | onsible for supplying corre<br>ages, write your name and | l case               |
| Part 12: Sign B        | elow   |                    |               |                         |                      |  |                      |
| have read the ar       | nswers on this Stateme                             | ent of Financial   | Affairs and a | any attachments a       | nd I declare under r | penalty of perjury that the                              |                      |
| are true and cont      | ect. I unucistanu mat i                            | naking a faise st  | atement, co   | ncealing property       | or obtaining mono    | y or property by fraud in co                             | answers<br>onnection |
| orien a samaapto       | y case can result in fin<br>1341, 1519, and 3571./ | ∉'s up to \$250,00 | 0, or impris  | onment for up to 20     | 0 years, or both.    | ,                  | J                    |
| x) Ati                 | 1120   | Fame 1             |               |                         |                      |  |                      |
| Stella & Gome          | z · · ·  | Birdy              | Signature     | of Debtor 2             |                      |  |                      |
| Signature of Deb       |  |                    |               | 0. 200.0. 2             |                      |  |                      |
| Date June 18,          | 2016   |                    | Date          | ·                       |                      |  |                      |
| Did you attach ad      | ditional pages to <i>Your</i>                      | Statement of Fil   | nancial Affa  | irs for Individuals I   | Filing for Bankrupte | cv (Official Form 107\2                                  |                      |
| No                     |  |                    |               |                         | <b>5</b>             | ,, (===================================                  |                      |
| □ Yes                  |  |                    |               |                         |                      |  |                      |
| Did you pay or ag      | ree to pay someone w                               | ho is not an atto  | rney to help  | you fill out bankrı     | uptcy forms?         |  |                      |
| ■ No<br>Tyes Name of P | arean Attach th                                    | a Dambourton D. C. |               |                         |                      |  |                      |
| - 103. Name ULF        | erson Attach the                                   | e bankruptcy Peti  | ιτιοη Prepare | r's Notice, Declaration | on, and Signature (O | fficial Form 119).                                       |                      |

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| Fill in this infor              | mation to identify your                             | case:                 |  |                            |  |
|---------------------------------|---|-----------------------|--|----------------------------|--|
| Debtor 1                        | Stella C Gomez                                      |                       |  |                            |  |
|                                 | First Name  | Middle Name           | Last Name  |                            |  |
| Debtor 2<br>(Spouse if, filing) | First Name  | Middle Name           | Last Name  |                            |  |
| United States Ba                | ankruptcy Court for the:                            | NORTHERN DIST         | FRICT OF ILLINOIS  |                            |  |
|                                 | annuaptoy Court to: u.o.                            |                       |  |                            |  |
| Case number (if known)          |   |                       |  |                            | Check if this is an                          |
|                                 |   |                       |  |                            | amended filing                               |
|                                 |   |                       |  |                            |  |
| Official Fo                     | orm 108   |                       |  |                            |  |
| Statemer                        | nt of Intentio                                      | n for Indiv           | riduals Filing Under   | Chapter 7                  | 12/15  |
|                                 |   |                       | <u> </u>   |                            |  |
|                                 | ividual filing under cha                            | -                     | out this form if:  |                            |  |
| _                               | e claims secured by yo                              |                       | at assuring d  |                            |  |
| -                               | sed personal property a<br>is form with the court w |                       | ot expired.<br>you file your bankruptcy petition or <b>k</b>   | by the date set for the m  | neeting of creditors,                        |
|                                 | ever is earlier, unless th                          |                       | e time for cause. You must also send                           |                            |  |
|                                 |   |                       |  |                            | <b>5</b>                                     |
|                                 | eople are filing together<br>nd date the form.      | r in a joint case, bo | th are equally responsible for supply                          | ing correct information    | i. Both debtors must                         |
| Be as complete:                 | and accurate as possib                              | le. If more space is  | needed, attach a separate sheet to t                           | this form. On the top of   | any additional pages.                        |
|                                 | our name and case nur                               |                       |  | с с ше тор с.              | any additional pages,                        |
| Part 1: List Y                  | our Creditors Who Have                              | e Secured Claims      |  |                            |  |
| 1 For any credit                | ors that you listed in Pa                           | art 1 of Schedule D   | : Creditors Who Have Claims Secure                             | d by Property (Official I  | Form 106D) fill in the                       |
| information be                  | elow.   |                       |  |                            | <i>,</i> ,                                   |
| identify the cr                 | editor and the property t                           | nat is collateral     | What do you intend to do with the secures a debt?              |                            | you claim the property exempt on Schedule C? |
|                                 |   |                       |  |                            |  |
| Creditor's <b>J</b>             | pmorgan Chase Ban                                   | k                     | ☐ Surrender the property.                                      |                            | No   |
| name:                           |   |                       | Retain the property and redeem in                              |                            |  |
| Description of                  | 1054 Bothwell Cr E                                  | Bolingbrook.          | Retain the property and enter into<br>Reaffirmation Agreement. | a ■ Y                      | ′es  |
| property                        | IL 60440 Will Cour                                  | nty                   | Retain the property and [explain]:                             |                            |  |
| securing debt:                  | 1/2 interest Tennal Common with sist                |                       | Retain without reaffirmation                                   |                            |  |
|                                 |   |                       |  |                            |  |
|                                 | our Unexpired Persona                               |                       | in Schedule G: Executory Contracts                             | and Unovnirod Losege       | (Official Form 106G) fill                    |
| in the informatio               | on below. Do not list rea                           | ıl estate İeases. Un  | expired leases are leases that are sti                         | II in effect; the lease pe |  |
| You may assume                  | e an unexpired persona                              | Il property lease if  | the trustee does not assume it. 11 U.S                         | S.C. § 365(p)(2).          |  |
| Describe your u                 | unexpired personal prop                             | perty leases          |  | Will the I                 | ease be assumed?                             |
| Lessor's name:                  |   |                       |  | □ No                       |  |
| Description of lea              | ased  |                       |  |                            |  |
| Property:                       |   |                       |  | ☐ Yes                      |  |
| Lessor's name:                  |   |                       |  | □ No                       |  |
| Description of lea              | ased  |                       |  |                            |  |
| . ropony.                       |   |                       |  | ☐ Yes                      |  |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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| De | btor 1              | Stella C Gomez  | Case number (if known)  |
|----|---------------------|---|---|
|    |                     |   |   |
|    | ssor's na           |   | □ No  |
|    | scriptior<br>perty: | of leased   | ☐ Yes   |
|    | ssor's na           |   | □ No  |
|    | scriptior<br>perty: | of leased   | ☐ Yes   |
|    | ssor's na           | ame:<br>of leased   | □ No  |
|    | perty:              | Torreased   | ☐ Yes   |
|    | ssor's na           | ame:<br>of leased   | □ No  |
|    | perty:              | i oi leaseu   | ☐ Yes   |
|    | ssor's na           |   | □ No  |
|    | scription<br>perty: | of leased   | ☐ Yes   |
| Pa | rt 3:               | Sign Below  |   |
|    |                     | alty of perjury, I declare that I have indica<br>at is subject to an unexpired lease. | d my intention about any property of my estate that secures a debt and any personal |
| X  | /s/ St              | ella C Gomez  | X   |
|    |                     | a C Gomez   | Signature of Debtor 2   |
|    | Signa               | ture of Debtor 1  |   |
|    | Date                | August 19, 2016   | Date  |

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| Fill in this infor                | mation to identify your                              | case:                   |                                  |                          |                                   |
|-----------------------------------|--|-------------------------|----------------------------------|--------------------------|-----------------------------------|
| Debtor 1                          | Stella C Gomez First Name                            | Middle Name             | Last Name                        |                          |                                   |
| Debtor 2<br>(Spouse if, filing)   | First Name   | Middle Name             | Last Name                        |                          |                                   |
| United States Ba                  | ankruptcy Court for the:                             | NORTHERN DISTRIC        | F OF ILLINOIS                    |                          |                                   |
| Case number<br>(if known)         |  |                         |                                  |                          | Check if this is an mended filing |
| Official Fo                       |  | n for Individu          | uals Filing Under                | Chapter 7                | 12/15                             |
| Under penalty of property that is | f perjury, I declare that<br>subject to an unexpired | have indicated my inter | ntion about any property of my e | state that secures a deb | t and any personal                |
| X Stella C G<br>Signature o       | tla ( - )<br>iomez<br>f Debtor 1                     | ony                     | X Signature of Debtor 2          |                          |                                   |
| Date <u>J</u>                     | une 18, 2016   |                         | Date                             |                          |                                   |

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| C        | hapter 7: | Liquidation        |
|----------|-----------|--------------------|
|          | \$245     | filing fee         |
|          | \$75      | administrative fee |
| <u>+</u> | \$15      | trustee surcharge  |
|          | \$335     | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-26723 Doc 1 Filed 08/19/16 Entered 08/19/16 15:20:10 Desc Main Document Page 49 of 54

B2030 (Form 2030) (12/15)

## **United States Bankruptcy Court Northern District of Illinois**

| In re          | Stella C Gomez   |                                       | Case No.                  |                           |              |
|----------------|--|---------------------------------------|---------------------------|---------------------------|--------------|
|                |  | Debtor(s)                             | Chapter                   | 7                         |              |
|                | DISCLOSURE OF COMPEN   | SATION OF ATTO                        | RNEY FOR D                | EBTOR(S)                  |              |
| С              | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b ompensation paid to me within one year before the filing e rendered on behalf of the debtor(s) in contemplation of  | of the petition in bankruptcy         | y, or agreed to be pai    | d to me, for services rer | ndered or to |
|                | For legal services, I have agreed to accept  |                                       | \$                        | 1,250.00                  |              |
|                | Prior to the filing of this statement I have received  |                                       |                           | 1,250.00                  |              |
|                | Balance Due  |                                       | \$                        | 0.00                      |              |
| 2. \$          | 355.00 of the filing fee has been paid.  |                                       |                           |                           |              |
| 3. Т           | The source of the compensation paid to me was:   |                                       |                           |                           |              |
|                | ■ Debtor □ Other (specify):  |                                       |                           |                           |              |
| 4. Т           | The source of compensation to be paid to me is:  |                                       |                           |                           |              |
|                | ■ Debtor □ Other (specify):  |                                       |                           |                           |              |
| 5. I           | ■ I have not agreed to share the above-disclosed comper  | nsation with any other person         | n unless they are mer     | nbers and associates of   | my law firm. |
| I              | ☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name  |                                       |                           |                           | w firm. A    |
| 6. I           | n return for the above-disclosed fee, I have agreed to rend  | der legal service for all aspec       | cts of the bankruptcy     | case, including:          |              |
| b<br>c         | <ul> <li>Analysis of the debtor's financial situation, and renderi</li> <li>Preparation and filing of any petition, schedules, staten</li> <li>Representation of the debtor at the meeting of creditors</li> <li>[Other provisions as needed]</li> </ul> | nent of affairs and plan whic         | h may be required;        | -                         | uptcy;       |
| 7. E           | By agreement with the debtor(s), the above-disclosed fee of  | does not include the following        | ng service:               |                           |              |
|                |  | CERTIFICATION                         |                           |                           |              |
|                | certify that the foregoing is a complete statement of any ankruptcy proceeding.  | agreement or arrangement fo           | or payment to me for      | representation of the de  | ebtor(s) in  |
| Aı             | ugust 19, 2016   | /s/ Gary L. Shilts                    | <b>S</b>                  |                           |              |
| $\overline{D}$ | nte  | Gary L. Shilts 25 Signature of Attorn |                           |                           | _            |
|                |  | Gary L. Shilts                        | iey                       |                           |              |
|                |  | Box 2432                              | 7 2422                    |                           |              |
|                |  | Aurora, IL 60507<br>630-859-8522 F    | -2432<br>ax: 630-859-8523 |                           |              |
|                |  | gshilts@earthlin                      | ık.net                    |                           |              |
|                |  | Name of law firm                      |                           |                           |              |

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B2030 (Form 2030) (12/15)

### United States Bankruptcy Court Northern District of Illinois

| In re   | Stella C Gomez  |  | Case No                                      |                                     |                    |
|---------|---|--|--|-------------------------------------|--------------------|
|         |   | Debtor(s)  | Chapter                                      | 7                                   |                    |
|         | DISCLOSURE OF COMPE   | NSATION OF ATTO  | RNEY FOR D                                   | EBTOR(S)                            |                    |
| C       | ursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2010 compensation paid to me within one year before the filing e rendered on behalf of the debtor(s) in contemplation                                    | ng of the petition in bankrupto  | y, or agreed to be pai                       | d to me, for services re            | t<br>endered or to |
|         |   |  |  | 1,250.00                            |                    |
|         | Prior to the filing of this statement I have received   |  | \$   | 1,250.00                            |                    |
|         | Balance Due   |  |  | 0.00                                |                    |
| 2. \$   | 355.00 of the filing fee has been paid.   |  |  |                                     |                    |
| 3. T    | he source of the compensation paid to me was:   |  |  |                                     |                    |
|         | ■ Debtor □ Other (specify):   |  |  |                                     |                    |
| 4. T    | he source of compensation to be paid to me is:  |  |  |                                     |                    |
|         | ■ Debtor □ Other (specify):   |  |  |                                     |                    |
| 5.      | I have not agreed to share the above-disclosed com  | pensation with any other perso   | n unless they are me                         | mbers and associates of             | f my law firm.     |
| [       | I have agreed to share the above-disclosed compensopy of the agreement, together with a list of the na  | sation with a person or persons<br>imes of the people sharing in the   | who are not member<br>ne compensation is at  | rs or associates of my l<br>tached. | aw finn. A         |
| 6. I    | n return for the above-disclosed fee, I have agreed to r  | ender legal service for all aspe   | cts of the bankruptcy                        | case, including:                    |                    |
| b<br>c. | Analysis of the debtor's financial situation, and rend<br>Preparation and filing of any petition, schedules, sta<br>Representation of the debtor at the meeting of credit<br>[Other provisions as needed] | tement of affairs and plan whi   | ch may be required;                          |                                     | ruptcy;            |
| 7. B    | y agreement with the debtor(s), the above-disclosed for   | ee does not include the following  | ng service:                                  |                                     |                    |
|         |   | CERTIFICATION  |  |                                     |                    |
| this ba | certify that the foregoing is a complete statement of an nkruptcy proceeding.  ne 18, 2016  tte   | Gary L. Shilts 2:<br>Signature of Attorn<br>Gary L. Shilts<br>Box 2432<br>Aurora, IL 6050:<br>630-859-8522 F | 587769<br>ney<br>7-2432<br>fax: 630-859-8523 | representation of the d             | ebtor(s) in        |
|         |   | gshilts@earthlii<br>Name of law firm   | rk.net                                       |                                     |                    |
|         |   |  |  |                                     |                    |

### United States Bankruptcy Court Northern District of Illinois

| In re | Stella C Gomez  |   | Case No.                |   |  |  |  |  |  |  |
|-------|---|---|-------------------------|---|--|--|--|--|--|--|
|       |   | Debtor(s)   | Chapter                 | 7 |  |  |  |  |  |  |
|       | VERIFICATION OF CREDITOR MATRIX   |   |                         |   |  |  |  |  |  |  |
|       |   | Number of Co  | Number of Creditors: 11 |   |  |  |  |  |  |  |
|       | The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge. |   |                         |   |  |  |  |  |  |  |
| Date: | August 19, 2016   | /s/ Stella C Gomez Stella C Gomez Signature of Debtor |                         |   |  |  |  |  |  |  |

|       | Case 16-26723   | Doc 1 | Filed 08/19/16<br>Document   |           | ed 08/19/1<br>2 of 54 | .6 15:20            | :10 | Desc Main |    |  |
|-------|---|-------|------------------------------|-----------|-----------------------|---------------------|-----|-----------|----|--|
|       | dayar Sanda A   |       |                              |           |                       |                     |     |           |    |  |
|       | United States Bankruptcy Court Northern District of Illinois  |       |                              |           |                       |                     |     |           |    |  |
| In re | Stella C Gomez  |       | ]                            | Debtor(s) |                       | Case No.<br>Chapter | 7   |           |    |  |
|       | VERIFICATION OF CREDITOR MATRIX  Number of Creditors:   |       |                              |           |                       |                     |     |           | 11 |  |
|       | The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the be (our) knowledge. |       |                              |           |                       |                     |     |           |    |  |
| Date: | June 18, 2016   |       | Stella C Gor<br>Signature of | mez       | Q- J                  | onez                |     |           |    |  |

Capital One / Menard 26525 N Riverwoods Blvd Mettawa, IL 60045

Citibank / Sears Citicard Credit Srvs/Centralized Bankrup Po Box 790040 Saint Louis, MO 63179

Citibank/The Home Depot Citicorp Credit Srvs/Centralized Bankrup Po Box 790040 Saint Louis, MO 63179

Comenity Bank/Pier 1 Po Box 182125 Columus, OH 43218

Jpmorgan Chase Bank Po Box 24696 Columbus, OH 43224

Kohls/Capital One Po Box 3120 Milwaukee, WI 53201

Merchants Credit 223 W Jackson Blvd Ste 700 Chicago, IL 60606

Synchrony Bank/QVC Po Box 965064 Orlando, FL 32896

Synchrony Bank/Walmart Po Box 965064 Orlando, FL 32896

Theressa Leal

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Visa Dept Store National Bank Attn: Bankruptcy Po Box 8053 Mason, OH 45040